





HEALTH DEPARTMENT,  
'HIGHFIELD',  
9, BATH ROAD,  
SLOUGH.

*To the Worshipful the Mayor, Aldermen and Councillors  
of the Borough of Slough*

MR. MAYOR, LADIES AND GENTLEMEN,

This report on the Health of the Borough of Slough for the year 1964 is the 16th which I have had the honour to present. For the second year running there is a third section upon the work of the School Health Service and this will be found towards the end of the book.

The story of Slough in 1964 is the continuation of the story which has been going on for half a century or so - busier, bigger and bursting at the seams.

It is always difficult to find variety for an Annual Report and if much of the material is unexciting then perhaps it is because it is the story of a job well done. Bad news hits the headlines only too rapidly and a breakdown in the Health Services, whether in the hospital, general medical or the local authority fields, becomes a matter for national press, radio and television often, it seems, exaggerating incidents far beyond their true significance.

On the whole then, 1964 was a quiet but busy year in the department but there were a few points worthy of notice - the fact that the natural increase was the greatest ever recorded, for instance, or that the number of new cases of Tuberculosis had gone up. With the number of new houses and the number of immigrants perhaps neither was surprising and yet here is an indication of the problems facing the Department. People mean problems for Health and Welfare Services and when they live in overcrowded circumstances the problems multiply. There was some success in eliminating the worst overcrowding, particularly in houses in multiple occupation but I am afraid one cannot hope to solve this problem completely yet awhile.

The Chief Public Health Inspector rightly points out the untiring efforts made to produce improved hygienic conditions in shops and food preparation premises. The officers of the Health Department do their best to safeguard the public but the man in the street is often far too ready to put up with poor conditions in food premises without complaint. Fortunately, the increase in the number of complaints makes it seem as if the public is waking up at last - there's

nothing like an epidemic of typhoid to stimulate public thought and action in these matters.

One of my earliest recollections on coming to work in Slough in 1950 was of trying to choose a site for a Municipal Abattoir and of paying a visit to the appropriate Ministry to see if approval would be forthcoming if Slough should decide to build one; one of my earliest recollections as a member of the Windsor Group Hospital Management Committee was of the decision taken by all the authorities concerned to build a new hospital at Slough. We are to have both - the hospital in late 1965 or early 1966 and the abattoir in 1967.

The part which air pollution plays in the production of lung cancer is much less clear than the part played by cigarette smoking and the existence of partially burned oil derivatives in the air is more likely than coal smoke to be associated with that disease. It is quite clear, however, apart from damage to buildings, that smoke and grit from any source are harmful to the lungs and largely responsible for the 'English' disease - bronchitis. Whatever may be the end results, pollution of the air is dangerous and the sooner we get rid of it the better.

A major piece of legislation in the field of preventive medicine which came into operation in 1964 was the Offices, Shops and Railway Premises Act, 1963. For the first time office and shop workers are to have their working standards protected, something which happened in factories and workshops many years ago.

I reported last year that the Department had moved to new office premises. This has allowed most of the Health and Welfare services of the Borough and County, with the exception of Health Visitor and District Nurse administration, to be housed in one building. There is little doubt that closer proximity of the sections has not only made it easier for callers to be supplied with the service they need but has also led to greater efficiency. It seemed at first, after the previous crowding, that the amount of space available was almost luxurious but this was, alas, an illusion. With new services and the appointment of additional officers all 'free' space has been taken up and lack of space must soon lead once again to a call for more room.

Alderman N.M. Eschle continued as the Chairman of the Health and Sanitation Committee and to him, to the members of the Committee and to the members of the whole Council, I would like to express my appreciation for their continuing help and encouragement. Staff shortages have, unfortunately, been only

too obvious in most sections during the year but all those who have worked in the Department have given of their best, usually with good humour; to all I would say 'Thank You' for making my own task a possible and pleasant one.

I remain, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

MACDONALD A. CHARRETT,

*Medical Officer of Health.*

JULY 1965

# ANNUAL REPORT FOR 1964

## SUMMARY OF STATISTICS

### GENERAL STATISTICS

Area ... ..	6,202 acres
Population: Registrar General's Estimate for mid-1964 ... ..	84,900
Number of dwelling houses, including flats at 1st April, 1964 ... ..	24,512
Rateable value as at 31st March, 1965 ...	£7,292,606
Rateable value as at 1st April, 1965 ...	£7,297,196
Estimated Product of Penny Rate 1965/66 ...	£30,000

### EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1964

<b>Live Births:</b>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate ... ..	865	817	1,682
Illegitimate ... ..	61	85	146
<b>Total</b>	<b>926</b>	<b>902</b>	<b>1,828</b>

Crude Birth Rate (per 1,000 population)	-	21.5
Corrected Birth Rate (allowing for sex and age of the population) (Comparability factor 0.94)	-	20.2
National Birth Rate	-	18.4
Ratio of local Birth Rate to National Rate	-	1.10:1
Illegitimate live births were 7.99% of total live births		

<b>Still Births:</b>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate ... ..	11	9	20
Illegitimate ... ..	1	1	2
<b>Total</b>	<b>12</b>	<b>10</b>	<b>22</b>

Total of live and still births	-	1,850
Still Birth rate per 1,000 live births	-	11.9
Still Birth rate per 1,000 population	-	0.26
National still birth rate per 1,000 total births	-	16.3

Deaths:	Males	Females	Total
	356	289	645
Crude Death Rate per 1,000 population	-	-	7.60
Corrected Death Rate (allowing for sex and age of the population) (Comparability factor 1.42)	-	-	10.79
National Death Rate per 1,000 population	-	-	11.3
Ratio of Local Death Rate to National Rate	-	-	0.95:1



**Maternal Deaths:**

Number of women dying in, or as a consequence of, pregnancy	-	Nil
Maternal mortality rate per 1,000 total live and still births	-	Nil

**Infant Mortality: (Deaths of Infants under 1 year of age)**

Deaths:	Males	Females	Total
Legitimate ... ..	13	18	31
Illegitimate ... ..	2	2	4
Total	15	20	35

Rate per 1,000 live births	-	19.1
Legitimate Infant Mortality Rate per 1,000 live births	-	18.4
Illegitimate Infant Mortality Rate per 1,000 live births	-	27.4
National Rate per 1,000 live births	-	20.0
Ratio of Local Rate to National Rate	-	0.95:1

**Neo-Natal Mortality: (Deaths of Infants under 4 weeks of age)**

Deaths:	Males	Females	Total
Legitimate ... ..	11	12	23
Illegitimate ... ..	2	1	3
Total	13	13	26

Rate for all infants under 4 weeks of age per 1,000 live births - SLOUGH	-	14.2
- NATIONAL	-	13.8

**Peri-Natal Mortality: (Still Births and deaths of infants under 1 week of age)**

Deaths:	Males	Females	Total
Deaths ... ..	11	13	24
Still Births ... ..	12	10	22
Total	23	23	46

Rate per 1,000 total live and still births	-	24.86
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**Other Deaths:**

	Males	Females	Total	Rate per 1000 Population
Cancer ... ..	87	68	155	1.83
Pulmonary T.B. ...	3	1	4	0.047
Non-Pulmonary T.B.	-	-	-	-

# I. VITAL STATISTICS

## BIRTHS

After allowing for inward and outward transfers the Registrar-General credited the Borough with 1,828 live births during 1964, an increase of 134 upon the previous year. Of these live births, 926 were males and 902 females.

The crude birth rate was nearly one and a half per thousand higher than in 1963 and even when this has been multiplied by the comparability factor of 0.94, a calculation which allows the birth rate of Slough to be compared with other areas of the country and indeed with the country as a whole, the corrected birth rate was over 20 per thousand, the first time at least in recent years that such a figure has been recorded; this rate of 20.2 compares with 18.9 in 1963 and 18.25 in 1962.

For the fourth year running the corrected birth rate for Slough has been greater than the rate for England and Wales, the rate for 1964 being 1.10:1 a proportion greater than that previously recorded.

Year	Corrected Birth Rate, Slough	Birth Rate England & Wales	Ratio	
			Slough	: England & Wales
1955	13.35	15.0	0.89	: 1
1956	13.51	15.7	0.86	: 1
1957	14.3	16.1	0.89	: 1
1958	15.76	16.4	0.96	: 1
1959	15.74	16.5	0.95	: 1
1960	16.74	17.1	0.98	: 1
1961	17.62	17.4	1.01	: 1
1962	18.25	18.0	1.01	: 1
1963	18.91	18.2	1.04	: 1
1964	20.2	18.4	1.10	: 1

## ILLEGITIMACY

The number of illegitimate births during 1964 was 148, an increase of only one over the previous year compared with a rise from 133 in 1962 to 147 in 1963. As the birth rate was higher this number of illegitimate births in 1964 actually represents a fall in the illegitimate rate from 8.56% to 7.99%. Of this total of 148, two were still-births (one male and one female) and of the live births 61 were males and 85 females: the sex ratio being almost exactly opposite that found in 1963.



1955	...	5.24
1956	...	4.79
1957	...	4.45
1958	...	5.01
1959	...	5.90
1960	...	5.68
1961	...	5.69
1962	...	7.73
1963	...	8.56
1964	...	7.99

#### STILLBIRTHS

The number of stillbirths fell by one - from 23 in 1963 to 22 in 1964. The rate per thousand total births being 11.9 in 1964 compared with 13.4 in 1963 and 16.8 in 1962. The 1964 rate, which compares very favourably with the National rate of 16.3 is, in fact, the lowest recorded with the exception of 1961 when it was just over ten and a half.

1955	...	25.7
1956	...	25.9
1957	...	19.6
1958	...	25.2
1959	...	26.8
1960	...	12.46
1961	...	10.53
1962	...	16.8
1963	...	13.4
1964	...	11.9

It is more important, however, to take the number of stillbirths in conjunction with the number of live-born infants who died within the first week of life. Improved medical and maternity services have caused many children to be born alive who previously would not have lived even for a short time. The line between life and death at birth in these instances is a very fine one and so, in some years, a higher stillbirth rate will be found while in other years it may be lower. Children who died soon after birth in 1964 were more numerous than they had been in the previous year while the number of stillbirths in 1964 was lower than it had been in 1963; taken together these totals were almost the same but for further comment see under the heading 'Perinatal Mortality'.

#### DEATHS

The number of Slough residents who died, which had jumped by about a hundred in 1963, fell to 645, a number nearer that normally recorded during a year. Of this number, 356 were males and 289 were females.

DEATH RATE - SLOUGH			
<i>Year</i>	<i>Crude Death Rate</i>	<i>Corrected Death Rate</i>	<i>National Rate</i>
1955	8.625	10.60	11.7
1956	8.47	11.1	11.7
1957	8.5	11.05	11.5
1958	7.74	10.53	11.7
1959	9.13	12.42	11.6
1960	8.6	11.69	11.5
1961	7.93	11.10	12.0
1962	7.94	11.06	11.9
1963	8.86	12.58	12.2
1964	7.60	10.79	11.3

From the above table the crude death rate, that is the number of persons dying per thousand of the population was 7.6. The sex and age structure of the population in Slough is obviously very different from that in such places as Worthing or Weston-super-Mare which have a large population of old people and comparison of the healthiness of differing places can only be made if factors such as this are eliminated.

The Registrar General produces a statistical figure known as the comparability factor which does just this and when the crude rate is multiplied by the comparability factor a corrected rate is obtained; this allows comparison to be made between the area under review, other areas to which suitable comparability factors have been applied and to the country as a whole. For Slough the comparability factor for deaths in 1964 was 1.42, an indication that the population is younger than that found in England and Wales as a whole; when the crude rate is multiplied by 1.42 the corrected rate was found to be 10.79 - this compares very favourably with 11.3 for the National Rate.

CAUSE OF DEATH	1963	1964
Heart disease	249	193
Cancer	161	155
Vascular lesions of the nervous system	86	72
Pneumonia and bronchitis	76	56
Accidents - all types	34	34
Other circulatory disease	25	20

There was no change in the order of the main causes of death in 1964 compared with the previous year although the number of deaths decreased considerably. The main reduction occurred in heart disease and pneumonia and bronchitis; very little change was noticed in the number of deaths from cancer or accidents.

CAUSES OF DEATH	1963		1964	
	M	F	M	F
1. Tuberculosis, respiratory ... ..	1	2	3	1
2. Tuberculosis, other ... ..	-	-	-	-
3. Syphilitic disease ... ..	3	-	1	-
4. Diphtheria ... ..	-	-	-	-
5. Whooping Cough ... ..	-	-	-	-
6. Meningococcal infection ... ..	-	-	-	-
7. Acute Poliomyelitis ... ..	-	-	-	-
8. Measles ... ..	-	-	-	-
9. Other infective and parasitic diseases ...	-	-	-	-
10. Malignant neoplasm, stomach ... ..	14	5	8	4
11. Malignant neoplasm, lung, bronchus ...	30	3	45	6
12. Malignant neoplasm, breast ... ..	1	18	-	16
13. Malignant neoplasm, uterus ... ..		8		7
14. Other malignant and lymphatic neoplasms	36	42	34	35
15. Leukaemia and aleukaemia ... ..	-	4	3	4
16. Diabetes ... ..	1	5	2	5
17. Vascular lesions of the nervous system ...	32	54	24	48
18. Coronary disease, angina ... ..	98	40	99	45
19. Hypertension with heart disease ... ..	4	9	2	5
20. Other heart disease ... ..	39	59	19	23
21. Other circulatory disease ... ..	11	14	9	11
22. Influenza ... ..	5	1	-	-
23. Pneumonia ... ..	18	18	21	12
24. Bronchitis ... ..	28	12	17	6
25. Other diseases of the respiratory system	8	4	1	-
26. Ulcer of stomach and duodenum ... ..	3	3	6	1
27. Gastritis, enteritis and diarrhoea ...	5	4	-	3
28. Nephritis and nephrosis ... ..	1	2	2	5
29. Hyperplasia of prostate ... ..	2		3	
30. Pregnancy, childbirth, abortion ... ..		-		-
31. Congenital malformations ... ..	6	4	4	5
32. Other defined and ill-defined diseases ...	24	24	25	32
33. Motor vehicle accidents ... ..	12	3	13	3
34. All other accidents ... ..	11	8	12	6
35. Suicide ... ..	2	4	3	4
36. Homicide and operations of war ... ..	1	-	-	1
ALL CAUSES ...	396	350	356	289

## SEX AND AGE DISTRIBUTION OF DEATHS 1964

Ages at Death in Years	Males	Females	Total
0 - 1	15	20	35
1 - 4	2	3	5
5 - 14	2	1	3
15 - 24	3	5	8
25 - 44	18	21	39
45 - 64	128	65	193
65 - 74	102	58	160
75 - plus	86	116	202
TOTAL	356	289	645

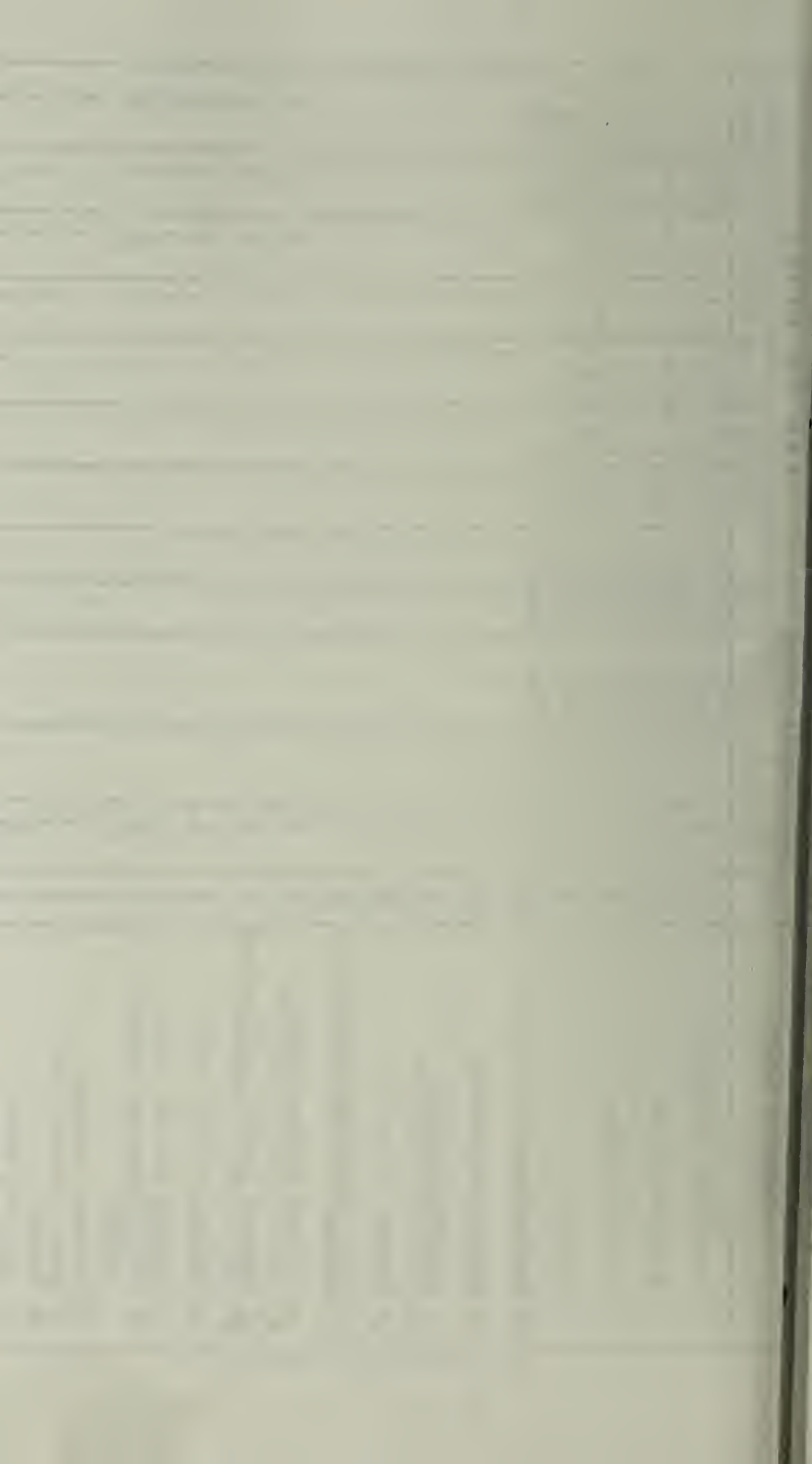
Of the 645 deaths, 362 (56.1%) were over the age of 65 years compared with 63.8% in 1963 and 61.1% in 1962; the deaths of the over 65s were shared by the sexes in the ratio of 188 men to 174 women.

The main reduction in deaths compared with 1963 occurred in the elderly - there were 166 fewer deaths in those over the age of 65 - 49 men and 67 women.



CAUSE OF DEATH	SEX	TOTAL ALL AGES	UNDER 4 WEEKS	4 WEEKS & UNDER 1 YEAR	AGE IN YEARS						65 -	75 & OVER
					1 -	5 -	15 -	25 -	35 -	45 -		
					1 -	5 -	15 -	25 -	35 -	45 -		
1. Tuberculosis, Respiratory	M F	3 1	- -	- -	- -	- -	- -	- -	- -	1 -	1 1	- -
2. Tuberculosis, other	M F	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
3. Syphilitic disease	M F	1 -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
4. Diphtheria	M F	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
5. Whooping Cough	M F	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
6. Meningococcal infection	M F	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
7. Acute Poliomyelitis	M F	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
8. Measles	M F	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
9. Other infective and parasitic diseases	M F	1 -	- -	- -	- -	- -	1 -	- -	- -	- -	- -	- -
10. Malignant neoplasm, stomach	M F	8 4	- -	- -	- -	- -	- -	- -	- -	- -	4 -	3 3
11. Malignant neoplasm, lung, bronchus	M F	45 6	- -	- -	- -	- -	- -	- -	1 -	3 -	14 3	8 1
12. Malignant neoplasm, breast	M F	16 -	- -	- -	- -	- -	- -	1 -	2 -	4 -	1 -	2 -
13. Malignant neoplasm, uterus	F	7	-	-	-	-	-	-	-	1	3	1
14. Other malignant and lymphatic neoplasms	M F	34 35	- -	- -	- -	- -	1 -	- -	1 3	3 6	9 9	10 6
15. Leukaemia, Aleukaemia	M F	3 4	- -	- -	1 -	- -	- -	1 -	1 -	- -	- -	1 2
16. Diabetes	M F	2 5	- -	- -	- -	- -	- -	- -	1 1	1 -	1 1	- 1
17. Vascular lesions of nervous system	M F	24 48	- -	- -	- -	- -	- -	1 -	1 -	4 1	11 11	4 31
18. Coronary disease, angina	M F	99 45	- -	- -	- -	- -	- -	- -	5 1	12 3	29 9	20 18
19. Hypertension with heart disease	M F	2 5	- -	- -	- -	- -	- -	- -	- -	- -	2 1	4 8
20. Other heart disease	M F	19 23	- -	- -	- -	- -	- -	- -	- -	1 -	3 2	7 17
21. Other circulatory disease	M F	9 11	- -	- -	1 -	- -	- -	- -	2 -	1 -	4 2	3 4
22. Influenza	M F	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
23. Pneumonia	M F	21 12	- -	- 2	- -	- -	1 -	- -	- -	1 -	2 -	10 7
24. Bronchitis	M F	17 6	- -	- -	- -	- -	- -	- -	- -	- -	3 1	5 5
25. Other diseases of respiratory system	M F	1 -	- -	- -	- -	- -	- -	- -	- -	- -	1 -	- -
26. Ulcer of stomach and duodenum	M F	6 1	- -	- -	1 -	- -	- -	- -	- -	- -	2 -	2 -
27. Gastritis, Enteritis and Diarrhoea	M F	3 -	- -	- -	- -	- -	- -	1 -	- -	- -	- -	1 -
28. Nephritis and Nephrosis	M F	2 5	- -	- -	- -	- -	- -	- -	- -	- -	- -	1 4
29. Hyperplasia of Prostate	M	3	-	-	-	-	-	-	-	-	-	3
30. Pregnancy, childbirth, abortion	F	-	-	-	-	-	-	-	-	-	-	-
31. Congenital Malformations	M F	4 5	2 2	2 1	- -	- -	- -	- -	- -	1 -	- -	- -
32. Other defined and ill defined diseases	M F	25 32	11 11	1 1	- -	- -	2 1	1 3	2 1	3 5	3 1	3 8
33. Motor vehicle accidents	M F	13 3	- -	- -	1 1	1 -	- -	1 -	- -	1 1	1 1	1 5
34. All other accidents	M F	12 6	- -	1 2	- -	- -	- -	- -	- -	- -	- -	- -
35. Suicide	M F	3 4	- -	- -	- -	- -	1 -	1 -	2 -	1 1	- -	- -
36. Homicide and Operations of War	M F	1 -	- -	- -	- -	- -	- -	1 -	- -	- -	- -	- -
TOTAL ALL CAUSES	M F	356 289	13 13	2 7	2 3	2 1	3 5	6 7	12 14	38 19	90 46	86 116
		645	26	9	5	3	8	13	26	57	136	202





## CANCER OF THE LUNG AND BRONCHUS

In 1963 I was able to record a smaller number of deaths from cancer of the lung and bronchus than had occurred in the previous year, although the 10-year picture had shown no cause for pleasure.

1964 showed that the previous year had not been a trend-setter but merely a chance fluctuation which is liable to occur when relatively small numbers are being used.

CANCER OF THE LUNG AND BRONCHUS - SLOUGH DEATHS		
<i>Year</i>	<i>Males</i>	<i>Females</i>
1955	20	5
1956	25	1
1957	28	5
1958	25	3
1959	35	4
1960	27	3
1961	29	5
1962	38	9
1963	30	3
1964	45	6

The table above shows that 1964 has been the worst year so far recorded and the average number of deaths from lung cancer has risen from 27.6 per year for men and 4.0 per year for women between the years 1954 - 1963 to 30.2 deaths per year for men and 4.4 for women during the 10 year period 1955 to 1964.

There have been sufficient reports to show the clear link between lung cancer and cigarette smoking, although it has never been suggested that smoking is the only cause. It could have been hoped that these reports would have had some effect but indications are that after some initial reduction in cigarette smoking there has again been a small but steady rise.

Health education has been continued during the year locally and there are indications that the relationship between lung cancer and smoking is being taken seriously by Central Government - advertisements on television are to be banned after a date in 1965 and there has been an intensive poster campaign by the Ministry of Health; increased taxation too might have some slight effect although the cynics might claim that all this does is to increase the cost of living.

## MATERNAL MORTALITY

It is a great pleasure to be able to report once again that no deaths due to childbirth or abortion occurred in 1964.

During the past 14 years there have been 17,146 births with only two maternal deaths - one in 1957 and one in 1961.

Although this record might be one which would encourage the Health Services to sit back on their laurels this is far from the case. Apart from all the day to day efforts in co-operation and co-ordination, regular meetings of the Maternity Liaison Committee are held. Representatives of the medical and nursing staffs of the hospitals and home services attend these meetings to discuss any shortcomings which may have occurred since the previous meeting and to consider whether any improvement in the service can take place. Although it would be foolish to state that perfection has been obtained it is satisfactory to know that suggestions so far made by the Ministry of Health and by professional bodies have nearly always been in operation in this district by the time the information has come 'from above'.

## INFANT MORTALITY

As I have mentioned in previous years the infant mortality rate as an index of the general medical and maternity services and the standard of living is being succeeded by the peri-natal mortality rate which is an expression of stillbirths and deaths of infants under one week of age per thousand total births.

So far as the infant mortality (deaths of infants under one year) was concerned the number rose from 31 in 1963 to 35 in 1964 a rise from 18.3 to 19.1 per thousand live births. This is disappointing and it will be seen from the succeeding table that most deaths occurred either in the first week of life (24) or between one and three months (6). This latter figure is rather unusual and is made up by 3 deaths from abnormal conditions arising at or before death and three from accidents - one from suffocation and two from inhalation of vomit.

Although the statistics in this report are based on the Registrar-General's information, other comment is made upon deaths which actually occurred during the year according to the local registrar's reports. There is usually a small discrepancy - this year it is one - because the Registrar General must base his statistics on information which has to be fed into computers early in the year whereas local information which may come in later can be used in this report which is completed later in the year.

The following table records infant deaths under the international classification of deaths; also indicated are the locations of death - at home or in hospitals in or away from this area.

CAUSES OF DEATH OF INFANTS UNDER ONE YEAR OF AGE													
CAUSES OF DEATH	UNDER 1 DAY	1 - 2 DAYS	3 - 5 DAYS	6 - 7 DAYS	TOTAL UNDER 1 WEEK	1 - 2 WEEKS	3 - 4 WEEKS	TOTAL UNDER 1 MONTH	1 - 3 MONTHS	4 - 6 MONTHS	7 - 9 MONTHS	10-12 MONTHS	TOTAL UNDER 1 YEAR
Pneumonia - 491*	-	-	-	-	-	-	-	-	-	-	1	-	1
Congenital Malforma- tions - 750 - 759	1	-	2	-	3	-	1	4	2	-	-	1	7
Birth injuries, Asphyxia & Infections of New- born - 760 - 769	5	4	-	-	9	-	1	10	-	-	-	-	10
Other diseases peculiar to Early Infancy - 770 - 776	8	3	1	-	12	-	-	12	1	-	-	-	13
Other Accidents - E910 - E936	-	-	-	-	-	-	-	-	3	-	-	-	3
TOTAL	14	7	3	-	24	-	2	26	6	-	1	1	34
WHERE DIED													
Home	-	-	-	-	-	-	-	-	3	-	1	-	4
Hospitals in this Area	13	7	3	-	23	-	2	25	3	-	-	1	29
Hospitals away from this Area	1	-	-	-	1	-	-	1	-	-	-	-	1
TOTAL	14	7	3	-	24	-	2	26	6	-	1	1	34

\* The figures in the Causes of Death Column and those given after the Causes of Death in the "accompanying details" refer to the Categories given in the International Statistical Classification of Diseases, Injuries and Cause of Death.

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**Pneumonia - 491\***

8 months - Broncho-pneumonia - Home

**Congenital Malformations - 750 - 759**

4 days - Gross anencephaly - Canadian Red Cross Hospital (750)

11 months - Renal failure due to meningocoele due to hydrocephalus - Canadian Red Cross Hospital (751)

2 months - Cerebral degeneration due to hydrocephalus - King Edward VII Hospital, Windsor (751)

5 days - Congenital heart disease. Associated hare lip and cleft palate - King Edward VII Hospital, Windsor (754.5)

2 months - Congenital heart disease due to pulmonary atresia - Upton Hospital (754.5)

3 weeks - Broncho-pneumonia due to multiple fractures due to fragilitas osseum - Canadian Red Cross Hospital (758.3)

Under 24 hours - Atelectasis due to congenital abnormalities - Old Windsor Hospital (759)

**Birth Injuries, Asphyxia and Infections of Newborn - 760 - 769**

Under 24 hours - Cerebral haemorrhage - Old Windsor Hospital (760.0)

Under 24 hours - Intra-partum asphyxia due to sub-arachnoid haemorrhage - Upton Hospital (760.0)

2 days - Cerebral haemorrhage. Associated prematurity - Canadian Red Cross Hospital (760.5)

3 weeks - Cerebral haemorrhage due to prematurity - Canadian Red Cross Hospital (760.5)



## Birth Injuries etc (contd.)

Under 24 hours	-	Atelectasis. Associated cleft palate and talipes equino-varus - Old Windsor Hospital	(762.0)
Under 24 hours	-	Atelectasis due to prematurity - Thorpe Coombe Maternity Hospital Walthamstow, E.17	(762.5)
Under 24 hours	-	Atelectasis due to extreme prematurity - Canadian Red Cross Hospital	(762.5)
1 day	-	Pulmonary syndrome due to prematurity - Canadian Red Cross Hospital	(762.5)
1 day	-	Pulmonary syndrome due to prematurity - Canadian Red Cross Hospital	(762.5)
2 days	-	Respiratory distress syndrome due to prematurity - Canadian Red Cross Hospital	(762.5)

## Other Diseases peculiar to Early Infancy - 770 - 776

2 days	-	Hydrops foetalis - Canadian Red Cross Hospital	(770.0)
Under 24 hours	-	Intra-partum asphyxia due to prematurity and diabetes mellitus - Upton Hospital	(774)
Under 24 hours	-	Prematurity (2lbs.10ozs.) due to twin pregnancy - Upton Hospital	(774)
Under 24 hours	-	Prematurity (2lbs.15ozs.) due to twin pregnancy - Upton Hospital	(774)
Under 24 hours	-	Prematurity - Upton Hospital	(776)
Under 24 hours	-	Prematurity. Associated achondroplasia - Canadian Red Cross Hospital	(776)
Under 24 hours	-	Extreme prematurity - Old Windsor Hospital	(776)

#### Other Diseases etc. (contd.)

Under 24 hours	-	Prematurity - Old Windsor Hospital	(776)
Under 24 hours	-	Prematurity - Canadian Red Cross Hospital	(776)
1 day	-	Prematurity - Old Windsor Hospital	(776)
2 days	-	Prematurity - Canadian Red Cross Hospital	(776)
4 days	-	Prematurity - Old Windsor Hospital	(776)
1 month	-	Prematurity (2lbs. 2ozs.) - Canadian Red Cross Hospital	(776)

#### Other Accidents - E910 - E936

2 months	-	Asphyxia due to inhalation of vomit - Home - Coroner's inquest - Verdict misadventure	(E921)
3 months	-	Asphyxia due to inhalation of vomit - Home - Coroner's inquest - Verdict Accident	(E921)
2 months	-	Asphyxia due to suffocation when lying in her cot - Home - Coroner's inquest - Verdict misadventure	(E924)

#### PERI-NATAL MORTALITY

In 1964, 24 infants died within the first week of life and there were 22 stillbirths, a total of 46 in 1,850 births and equivalent to a loss of 24.86 per 1,000 total births.

Reference to the peri-natal mortality has already been made earlier in the report. It includes stillbirths and deaths of infants during the first week of life, a period in which they are struggling to adapt themselves to the vast changes they have undergone during and following birth.

More and more children who are born alive are kept alive by better treatment including the use of special hospital units and our attention now needs to be focussed more upon the production of live babies and their survival for the first vital few days. We are succeeding in this task although perhaps progress is not as fast as we would like.

The table below shows that over the past seven years there has been a considerable improvement; the lower the figure becomes, of course, the more difficult it is to show any improvement.

1958	...	34.4
1959	...	34.0
1960	...	28.3
1961	...	26.6
1962	...	24.4
1963	...	25.05
1964	...	24.86

#### NEO-NATAL MORTALITY

Neo-natal deaths are those occurring within four weeks of birth and the number in 1964 was 26; this gives a neo-natal mortality rate of 14.2.

The National Rate for 1964 was 13.8.

#### INQUESTS

37 inquests were held upon residents of the Borough in 1964 the same number as in 1963. The causes of death as recorded by the Registrars of Births and Deaths, following receipt of the Coroner's certificates were as follows:-

	<i>Males</i>	<i>Females</i>	<i>Total</i>
<b>Natural Causes:</b>	2	-	2
<b>Accidents:</b>			
Inhalation of coal gas ...	1	-	1
Inhalation of vomit ...	2	1	3
Road accident ...	10	3	13
Drowning ...	2	1	3
Falls ...	-	3	3
Suffocation ...	-	1	1
<b>Suicide:</b>			
Inhalation of coal gas ...	1	2	3
Chloral hydrate poisoning	1	-	1
Barbiturate poisoning ...	1	1	2
Inhalation of exhaust fumes	-	1	1

	<i>Males</i>	<i>Females</i>	<i>Total</i>
<b>Open Verdict:</b>			
Cause of death unascertainable ... ..	1	-	1
Road Accident ... ..	1	-	1
<b>Inquest adjourned - not reopened:</b>			
Road accident ... ..	-	1	1
<b>Homicide:</b>			
Stab wounds of chest ...	-	1	1
	22	15	37

The total number of road deaths - 13 - was only one less than in the previous year. Of the three who died from inhalation of vomit, two were infants under six months of age and one was a man of 32 years who was drunk. The cause of death of one young man of 29 could not be established and one young lady of 32 died of stab wounds of the chest.

#### POPULATION

The Registrar-General estimated the growth of the town's population between 1st July 1963 and 30th June 1964 to be 690; the total population being 84,900.

This increase is surprisingly small. The natural increase, that is births less deaths, was the highest ever recorded at 1,183 and this means that if there were in fact only 690 more people living in this town on 1st July 1964 than there had been a year earlier then there must have been a net emigration of 493; see table below.

<i>Year</i>	<i>Natural Increase (births less deaths)</i>	<i>Immigration</i>	<i>Population</i>
1954	465	- 325	67,090
1955	400	450	67,940
1956	430	820	69,190
1957	497	1,873	71,560
1958	705	1,355	73,620
1959	617	1,213	75,450
1960	760	1,200	77,410
1961	958	2,322	80,690
1962	1,035	975	82,700
1963	948	562	84,210
1964	1,183	- 493	84,900



It is difficult to believe that this was so - the prosperity of the town continued and unemployment was almost at the lowest level ever recorded, there was some continued immigration from Commonwealth countries; another 300 houses were occupied and the number of voters on the Electoral Register increased from 53,679 in February 1963 to 54,046 in February 1964.

The Registrar-General can quite easily estimate the total population of England and Wales during intercensal years but the movements of population within the country is more difficult to assess.

Estimates in later years will indicate whether there really has been a trend away from the town and the next census will remove all doubts.



## II. GENERAL HEALTH SERVICE

### CLEANSING, DISPOSAL OF REFUSE AND KITCHEN WASTE, STREET CLEANING, ETC.

Mr. J.A. King, the Borough Engineer, has kindly provided the following information on the cleansing and refuse collection services.

#### **Street Cleansing**

The mechanical road sweepers which were first introduced in 1963 have been of considerable value to the road sweepers but the continued shortage of staff meant that the Council were unable to operate the service as frequently as it would have liked. The roads of a town seem staggeringly long when given as a total mileage; Slough for instance has no less than 96 miles of roads.

#### **Street Litter Bins**

More and more litter bins have been provided and there is less and less excuse of throwing rubbish on to the ground - an act which is anti-social as well as illegal.

#### **Street Gullies**

Another of the essential services provided by the Borough Engineer's department is the periodic cleansing of street water gullies - without the clearing of these traps several times a year, streets would become flooded each time it rained.

#### **Refuse Collection and Disposal etc.**

Refuse collection is one of those services which is scarcely ever considered unless anything goes wrong and it is fortunate that rarely does the public need seriously to consider the refuse collection service. Refuse collection can hardly be considered an attractive occupation however and those who operate the service are to be congratulated upon the high standard normally obtained.

Although the placing of unwanted articles or rubbish in dustbins is a time-honoured method of disposal, many householders do not seem to know what to do with articles too large for these receptacles; that they find their own methods of dumping unwanted objects is only too obvious by the number of unauthorised collections of rubbish which can be seen around this, or indeed any other, town. There is a simple answer - send a postcard to the Borough Engineer; he will arrange for the items to be removed from your house without charge.

## **Cesspools**

The number of cesspools is happily being reduced year by year and the latest count, at the end of 1964, showed that they are now down to 50 in the town; it was 90 at the end of 1963. Cesspool disposal of sewage, although necessary in the country, is not suitable for towns and it is pleasing to know that the number of cesspools remaining in Slough has been reduced to such a low number.

## **Salvage**

The collection of kitchen waste by contractors continued during 1964, the waste food bins being provided, as before, to residents who ask for them. Waste paper collections were made from shops and office premises as well as from private households. Saleable objects are salvaged from the refuse and no less than £6,600 was recorded as income from the sale of such materials during 1964.

## **Public Conveniences and Baths**

The Council provides a daily service to the large number of unattended public conveniences in recreation grounds and public places within the town and these conveniences suffer from vandalism in the same way that conveniences in many parts of the country suffer - it is strange how these buildings seem to act as targets for those bent on destruction. I wonder how often those responsible ever consider the distress caused to those who arrive after they have been there, apart from the extra cost it throws upon them, or at least upon their families, by repair which has to be paid for out of the rates.

The conveniences at William Street and in the No. 1 Wellington Street Car Park, which are staffed, obviously suffer to a much smaller extent. The conveniences in the car park also have public baths and these are in constant daily use from early in the morning until late at night.

## **WATER**

1964 saw the last complete year of the separate water undertakings in this area - in early 1966, the Burnham, Dorney and Hitcham Waterworks Co. Ltd. and the undertakings of the Slough Corporation, the New Windsor Corporation and the Eton Urban District Council are to be combined into one joint water board. I am sure that there must be advantages in this arrangement but, so far as Slough is concerned, it has one definite disadvantage - the water from these undertakings will be mixed and, as the water from the undertakings apart from Slough are almost entirely fluorine free, the amount of natural fluorine in the water which Slough residents will drink will fall short

of the existing level which, being between 0.7 and 0.9 parts per million is not far short of the amount considered to be ideal.

It would, of course, be possible to raise the fluoride content to 1.0 parts per million by appropriate artificial dosage but this will need the agreement of all the Local Authorities concerned - Slough and Windsor Boroughs, Eton Urban and Eton Rural District Councils and the Berks. and Bucks. County Councils. I am cynic enough to believe that the necessary agreement will not be forthcoming or at least will be delayed - meanwhile tooth decay in Slough will rise - perhaps there may be some slight lessening of decay in the other areas by way of compensation.

### **Slough Corporation Water Supply**

Another 374 new domestic water supply connections were made during the year. 86 samples were taken for bacteriological analysis and all were found to be satisfactory.

The Corporation now supplies a population of about 88,000 and these use about 20.26 gallons per head per day for trade purposes and 36.52 gallons per head per day for domestic purposes - a grand total of four and a half million gallons of wholesome treated, piped and pumped water each day.

As this will be the last occasion on which a separate report on the Slough undertakings will be made it is worthwhile recording the results of analyses in some detail.

The following is the laboratory report of a routine sample of water taken from the Slough supply on 18th June, 1964.

#### *(Chemical results in Parts per Million)*

Appearance	Bright with a few particles
Turbidity	less than 3
Colour	Nil
Odour	Nil
pH	7.5
Free Carbon Dioxide	14
Electric Conductivity	655
Dissolved solids dried at 180°C	470
Chlorine present as Chloride	38
Alkalinity as Calcium Carbonate	240
Hardness - Total	320
Carbonate	240
Non-carbonate	80
Nitrate nitrogen	3.0



Nitrite nitrogen	Absent
Ammoniacal nitrogen	0.01
Oxygen absorbed	0.10
Albuminoid nitrogen	0.00
Metals - Iron, Zinc, Copper, Lead	Absent
Fluoride	0.7

The Analyst's report was as follows:

“This sample is practically clear and bright as it contains only a few particles of matter in suspension.

The water is just on the alkaline side of neutrality, very hard in character but not extremely so and it contains no excess of mineral constituents.

It is of the highest standard of organic and bacterial purity.

From the aspect of the chemical and mineral analyses these results are an indication of a pure and wholesome water suitable for public supply purposes.’’

During 1964 the Department of Conservative Dentistry of the Royal Dental Hospital of London School of Dental Surgery carried out a dental caries survey of adults in Slough. This town was chosen because the amount of fluorine in the drinking water is near the optimum level and has been so for a number of years. In order to compare the level of fluoride in Slough water the research team had analyses made of eleven samples taken in March 1964 from widely scattered places in the town - results varied between 0.73 and 0.86 parts per million but all except one fell between 0.73 and 0.78 parts per million.

#### **Burnham, Dorney and Hitcham Waterworks Co. Ltd.**

A further 30 houses were supplied with water by this company during 1964. The water is treated by super chlorination followed by dechlorination and the 50 samples submitted to the Counties Public Health Laboratories for chemical and bacteriological examination showed that the water continued to be of the highest standards of organic quality and bacterial purity.

#### **Slough Estates Limited Water Supply**

This water, which comes from the lower greensand is much softer than that obtained from the Slough Corporation's source of supply and it contains a certain amount of iron - between 0.2 and 0.3 parts per million. This, however, does not affect the wholesomeness of the water which is of the highest standard of

organic and bacterial quality, a fact confirmed by continuing satisfactory samples taken throughout the years.

### **Swimming Bath Water**

The number of samples of swimming bath water shows a considerable decrease upon the previous year; this is largely because the Slough Lido which was undergoing major reconstruction was unfortunately not available during the year. Samples were, however, taken from the Community Centre Bath which is open to the public all the year round and from the school swimming pools which are available only to school pupils. 54 samples were taken during 1964 and all were satisfactory, a result which is particularly pleasing during a summer which had more than its share of fine warm weather.

### **Pet Animals Act, 1951**

### **Riding Establishments Act, 1939**

The premises registered under these Acts were visited regularly by the Council's Veterinary Surgeon during the year and conditions were found to be satisfactory.

### **Animal Boarding Establishment Act, 1963**

This Act, which came into operation on 1st January, 1964, placed responsibility on the Council for licensing boarding establishments for animals. Two such premises which fell to be dealt with under the Act applied for registration and after satisfactory reports had been received from the Council's Veterinary Surgeon, the applications were approved and licences issued.

### **National Assistance Act, 1948, Section 47**

### **National Assistance (Amendment) Act, 1951**

I am very pleased to be able to report that it was not necessary to take action under either of these Acts during 1964.

### **STAFF MEDICAL EXAMINATIONS**

The following table shows the number of medical examinations carried out during the year, together with the numbers performed during the previous five years for comparison.

It will be seen that apart from medical examinations, 242 questionnaires were scrutinised. These questionnaires are now used by the County Council instead of medical examinations for the majority of employees but the right to carry out a medical examination is still reserved and is still performed if answers to the questionnaire are doubtful or unsatisfactory. In case it should be thought that there had been a great increase in the



number or in the turnover of the County Council's local staff I should explain that canteen and kitchen staff and cleaners at schools are now included in those who complete questionnaires: these change rapidly and, in fact, some never take up the jobs even after they have completed the forms. Examinations are continued for drivers and candidates for entry into teachers' training colleges and an x-ray of the chest is taken on entry and, if necessary, at regular intervals for those employees coming into contact with children.

	1959	1960	1961	1962	1963	1964
Officers of the Slough Borough Council	34	44	57	71	53	97
Officers of the Bucks County Council	91	94	96	121	109	21
For admission to Teachers' Training Colleges and teaching for the first time	46	51	48	64	56	72
Servants entering Superannuation Scheme	16	28	22	19	15	19
Medical Questionnaires	-	-	-	-	-	242
TOTALS	187	217	223	275	233	451

#### LABORATORY

1964 was a slack year for the laboratory, the number of examinations falling from 1,489 in 1963 and 1,022 in 1962 to 889 in 1964.

There was a great reduction in examination of faeces for organisms of the coli/typhoid/dysentery group and fewer samples of swimming bath water were analysed, there was no outbreak of intestinal disease such as the one which occurred at the residential nursery in 1963, and unfortunately the Slough Lido was not open in 1964 and so not so many swimming bath samples were taken.

	Positive	Negative
Swabs for Diphtheria Bacilli	-	3
Swabs for Haemolytic Streptococci	-	2
Urine for routine examination		175
Faeces for coli/typhoid/dysentery group	-	10
Miscellaneous examinations		6
Blood Counts		12
Haemoglobin estimations		12

**Milk Samples:***Satisfactory**Unsatisfactory*

(a) Phosphatase test	126	-
(b) Methylene Blue test	169	-
(c) Turbidity test	5	-
(d) Chemical tests for fats, solids and water	155	-

**Water Samples:**

(a) Drinking water	55	1
(b) Swimming bath water	54	-

**Ice Cream:**

(a) Chemical tests	52	-
(b) Bacteriological tests	52	-
Grade I - 51		
Grade II - -		
Grade III - -		
Grade IV - 1		

	NUMBER OF SAMPLES TAKEN						PERCENTAGE OF SAMPLES					
	1959	1960	1961	1962	1963	1964	1959	1960	1961	1962	1963	1964
Grade I	67	65	52	52	75	51	98.5	98.5	98.2	100.0	93.3	98.1
Grade II	1	1	1	-	1	-	1.5	1.5	1.8	-	1.3	-
Grade III	-	-	-	-	1	-	-	-	-	-	1.3	-
Grade IV	-	-	-	-	3	1	-	-	-	-	4.0	1.9

Only one ice-cream sample was unsatisfactory; a repeat sample from this cafe, which has now closed, was satisfactory.

**MORTUARY**

The number of post-mortem examinations which had remained about the same for three years, showed an increase of 24 in 1964 to a new high total of 157. This emphasised the need for alterations to allow the pathologist to work more rapidly and although changes in the scheme caused some delay, the improved facilities were available in the early part of 1965 - further details will be given in the next report.

1959	...	115	1962	....	138
1960	...	125	1963	...	133
1961	...	135	1964	...	157

## CREMATORIUM

1964 was the first full year of the Crematorium's operation. Although most applications for cremation create little difficulty there can be problems of many kinds which could cause delay and I am pleased to report that arrangements made for the work of the Medical Referee, without whose signature cremation cannot take place, went smoothly; this was largely due to the great assistance given by the Cemetery and Crematorium staff.

In order to maintain a continuous service deputy medical referees - the Deputy Medical Officer of Health, one of the Medical Officers in the Department and one of the General Practitioners in the Borough - were appointed in addition to my own appointment as Medical Referee.

## HOME HELP SERVICE

Details of the home help service provided in the South Bucks Area during 1964 and the preceeding years are given in the table following this paragraph. As mentioned in previous years there is no separate account kept of the Borough of Slough but the statistics give a fair picture of the development of this service both within and without the town.

It will be noted that there was some slight reduction in the number of people helped by home help but a small expansion in the Good Neighbour service. The reduction in straightforward home help cases was mainly in the Acute sick and Maternity groups and the decrease occurred during the second half of the year - it was probably linked with the increase in the basic charge for Home Help from 3/9d. to 5/9d. per hour. Charges are made according to an assessed income when a request for reduction in payment is made but the two groups mentioned are much more likely than the elderly or chronic sick to be asked to pay the full amount.

Number of Home Helps as at	1960	1961	1962	1963	1964
31st December: -					
(a) Full-time	-	-	-	-	-
(b) Part-time	48	56	69	63	62
Number of Good Neighbours as at					
31st December: -		5	9	10	12

**Number of Cases who received help during: -**

	1960	1961	1962	1963	1964
(a) Acute Sick	78	84	77	68	61
(b) Chronic Sick	106	105	122	58	60
(c) Aged and Infirm	254	310	331	443	432
(d) Tuberculosis	2	2	2	3	2
(e) Maternity	83	66	57	74	57
	523	567	589	646	612

There were, in addition

(f) Good Neighbours	19	24
(g) Problem Families	3	3
(h) Mentally disordered	11	5

making a total of 644 separate cases helped during the year.

The number of problem families requiring help fortunately remained small as they are very time-consuming and difficult to deal with. Only a few helps are capable of giving this very necessary but often unpleasant service and often it seems as if the whole exercise is useless. Assessment of the value is extremely difficult but looking back on three cases there is reason to believe there may have been some improvement or at least the continuance of the family as a unit and the beginning of some measure of self-respect once again.

Good neighbourly help, particularly to the aged living alone may keep the frail and infirm in their own houses instead of forcing them into hospital. Where necessary the home help service may be supplemented by a good neighbour who will do odd jobs such as lighting the fire, getting the last drink at night or making sure that a cup of tea starts the day aright while in other cases the good neighbour help may be all that is required.



### III. PREVALENCE AND CONTROL OF INFECTIOUS DISEASE

1964 was really remarkably free from infectious disease except tuberculosis. Perhaps it is not surprising that the conventional scourges of earlier days are decreasing or disappearing as improved standards of hygiene and immunisation have either eliminated the physical condition necessary for the spread or have created personal protection against the bacteria or viruses which caused the epidemics so prevalent in the earlier years of this century and before.

The only disease which occurs regularly in large numbers is measles and there is every indication that active immunity by injection against this condition will be available shortly; although the disease itself is usually mild the complications, mainly concerned with the ears, still occur in sufficient numbers to cause hardship to many children. Experience is showing that minor degrees of deafness sufficient to handicap a child at school may well go undetected by parents or teachers.

Tuberculosis, which had seemed to be on its way out, did in fact increase considerably and from the list of names of those notified as suffering from the disease it is clear that about half came from Asia, probably from India and Pakistan. Although some immigrants probably brought the disease with them when they came a few years ago there is no doubt that quite a proportion of the immigrant population is now contracting the disease after arrival - almost certainly the earlier unchecked arrivals have created the focus of infection and the overcrowding under which many immigrants live contributes much to the spread of the disease.



# CASES NOTIFIED DURING THE YEARS 1955 - 1964

	CASES NOTIFIED AND POPULATION IN THOUSANDS										
	YEAR										
	1964	1963	1962	1961	1960	1959	1958	1957	1956	1955	
	84	84	82	80	77	75	73	71	69	67	
Acute Poliomyelitis - Paralytic ... - Non-Paralytic	- -	- -	2 -	- -	- -	- -	- -	3 -1	5 -5	5 -6	
Dysentery ... ..	2	8	9	2	8	1	14	6	-	19	
Encephalitis - Infective ... ..	-	-	-	-	-	-	1	-	2	-	
- Post-Infective ... ..	1	-	-	-	-	-	-	-	-	-	
Enteric Fever ... ..	-	-	-	-	-	1	1	-	-	-	
Erysipelas ... ..	5	6	5	6	9	22	12	9	18	14	
Food Poisoning ... ..	1	3	3	18	3	2	9	1	-	-	
Malaria (contracted abroad) ... ..	-	-	1	-	-	1	-	-	-	-	
Measles ... ..	191	1,066	193	1,324	244	797	442	1,001	52	1,185	
Meningococcal Infection ... ..	-	1	1	-	-	1	-	-	-	1	
Ophthalmia Neonatorum ... ..	1	-	1	-	4	-	2	-	-	-	
Pneumonia ... ..	2	8	7	20	17	71	31	29	19	41	
Puerperal Pyrexia ... ..	20	24	14	12	29	41	38	25	23	21	
Scarlet Fever ... ..	23	18	7	18	32	68	39	36	27	11	
Tuberculosis - Pulmonary ... ..	47	35	38	53	51	40	48	36	57	93	
- Non-Pulmonary ... ..	15	9	9	5	5	7	9	6	12	11	
Whooping Cough ... ..	35	28	28	19	27	46	64	69	64	56	

# INCIDENCE OF INFECTIOUS DISEASES IN WARDS OF BOROUGH

	BURNHAM NORTH	BURNHAM SOUTH	CENTRAL NORTH	CENTRAL SOUTH	CHALVEY	FARNHAM NORTH	FARNHAM SOUTH	LANGLEY	STOKE NORTH	STOKE SOUTH	UPTON	TOTAL
Dysentery ...	-	-	-	-	-	-	2	-	-	-	-	2
Encephalitis - Post Infective ...	-	-	-	-	-	-	-	1	-	-	-	1
Erysipelas ...	-	-	2	-	2	-	1	-	-	-	-	5
Food Poisoning ...	-	-	-	-	1	-	-	-	-	-	-	1
Measles ...	65	16	4	5	37	6	17	26	3	4	8	191
Opthalmia Neonatorum	-	-	-	-	-	-	-	-	-	1	-	1
Pneumonia ...	-	-	-	-	-	1	-	-	-	-	1	2
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	20	20
Scarlet Fever ...	2	-	4	2	1	1	-	7	-	3	3	23
Tuberculosis: Pulmonary ...	5	4	5	3	8	2	5	9	1	4	1	47
Non-Pulmonary ...	-	1	1	1	2	4	1	-	-	4	1	15
Whooping Cough ...	1	4	7	3	5	3	2	3	6	1	-	35

**MONTHLY INCIDENCE OF NOTIFIABLE INFECTIOUS DISEASES**

	JAN.	FEB.	MAR.	APL.	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL
Dysentery ... ..	-	-	-	-	-	-	-	-	-	-	-	2	2
Encephalitis - Post Infective ...	-	-	-	1	-	-	-	-	-	-	-	-	1
Erysipelas ... ..	1	-	-	-	-	-	-	1	-	2	1	-	5
Food Poisoning ... ..	-	-	-	-	-	-	-	-	-	-	1	-	1
Measles ... ..	8	14	7	3	-	2	13	7	1	7	28	101	191
Ophthalmia Neonatorum ...	-	-	1	-	-	-	-	-	-	-	-	-	1
Pneumonia ... ..	-	-	-	-	-	-	1	1	-	-	-	-	2
Puerperal Pyrexia ... ..	3	6	-	2	2	1	2	-	2	1	1	-	20
Scarlet Fever ... ..	2	2	5	1	3	-	1	1	-	1	3	4	23
Tuberculosis ... ..	3	2	3	3	5	1	4	3	2	3	13	5	47
Pulmonary ... ..	3	2	3	3	5	1	4	3	2	3	13	5	47
Non-Pulmonary ... ..	1	1	-	2	1	1	2	4	2	1	-	-	15
Whooping Cough ... ..	3	-	-	5	3	6	3	2	6	3	4	-	35

## INFECTIOUS DISEASES

### MEASLES

The first of the three tables on preceding pages shows quite clearly that measles epidemics occur every other year and there are, in fact, periods when very few cases occur at all. 1963 had been an epidemic year and by the summer, when nearly all the non-immune children had been attacked the number of new cases each month was very small. This state of affairs continued for nearly eighteen months, in fact from July 1963 until November 1964 when a sharp rise occurred again - in December 1964 there were 101 cases and the first signs of a new epidemic which took place in the early months of 1965.

As the latter part of 1965 and most of 1966 should be an inter-epidemic period would I be justified in hoping that we have seen the last of the big outbreaks ? Perhaps a little early to be so optimistic but trials of measles vaccines taking place in 1965 show promise and the public health service will not be slow in offering immunisation when it is shown to be beneficial and safe.

### DYSENTERY

Two cases were notified during the year and once again Brookside Residential Nursery was involved in this type of illness.

Immediately the cases were discovered there was a search for others but none was found nor were there any carriers. Both children were admitted to Maidenhead Isolation Hospital but although one was quickly cured and returned to the Nursery, the other continued to carry the germ for many months and remained in hospital where he was a firm favourite with all the staff.

### FOOD POISONING

Diarrhoea and vomiting caused one doctor to notify a very young child of 2½ years as suffering from food poisoning. Careful investigation failed to show any real evidence that the child's illness was due to food and no other person in the household was taken ill.

### ENTERIC FEVER

Readers may be surprised to find comment upon Enteric Fever - which includes Typhoid and Paratyphoid Fevers - when there have been no cases in the town.

Late in 1964 one of the biggest outbreaks of typhoid in this country for many years occurred in Aberdeen. Apart from the suffering caused to those affected the shock created in the



general population by an epidemic of this type is a severe and long-lasting one as I know from personal experience of the Croydon outbreak nearly 30 years ago.

The Croydon outbreak was caused by contamination of a local well while the Aberdeen epidemic had its origins many thousands of miles away. In both cases the Public Health Departments were stretched to their limits but they dealt with the situations in a quick and efficient manner.

No-one knows when an outbreak of any type may hit a town and Heaven forbid that we in Slough should ever be unfortunate enough to have one but what is clear is the necessity to maintain the Public Health service at strength not only to deal with any emergency which might arise but to be ever-vigilant in order to reduce to a minimum the likelihood of such a catastrophe ever arising.

#### SCARLET FEVER

A small number of cases was notified during the year and none was serious. Although there were more cases during the months towards the beginning and end of the year there was nothing approaching an outbreak of any kind.

#### PUERPERAL PYREXIA

Puerperal Pyrexia means a fever occurring during or shortly after childbirth - notification must be made irrespective of the cause which may or may not be serious. Children are born at home and in hospital so that, theoretically, cases can occur anywhere; the fact that most cases occur in hospital does not necessarily mean that conditions there are more likely to lead to fever or infection although there is some evidence to show that this is so. Appearances must be weighted against hospitals, however, because three-quarters of all births take place there and cases likely to be complicated in any way are admitted.

All 20 cases occurring in 1964 were in Upton Hospital and although the staff is first-class and the standards beyond reproach there is such pressure upon the facilities available that the slightest slip could lead to a serious outbreak. This has been stressed again and again in the past and it is pleasing to note there will be an expansion in the number of maternity beds at Upton Hospital when the new Wexham Park Hospital opens. Before rejoicing, however, we must be assured that there will be a real increase in maternity beds for mothers in this area - unless it is then we are no better off even if a brand-new unit tends to dazzle our eyes for the moment.



## VACCINATION AND IMMUNISATION

The table of vaccination and immunisation has now become so complicated that some clarification in the text of the report is really required.

Apart from vaccination against Smallpox, immunisations against Diphtheria, Whooping Cough, Tetanus and Poliomyelitis can be performed separately or together or in any combination. Most frequently Diphtheria, Whooping Cough and Tetanus are given in one course of three injections, although some family doctors include Poliomyelitis and give protection against all four diseases at one time; most, however, prefer to give protection against poliomyelitis by mouth with the Sabin vaccine.

The first table gives the outline of the actual completed courses while the paragraphs following give further information about the number of children protected against the individual diseases.

	1963	1964
Primary Diphtheria	11	8
Primary Whooping Cough	2	-
Primary Diphtheria/Whooping Cough	2	1
Primary Tetanus	106	31
Primary Diphtheria/Tetanus	38	50
Primary Diphtheria/Whooping Cough/ Tetanus (Triple)	878	928
Primary Diphtheria/Whooping Cough/ Tetanus/Poliomyelitis (Quadrilin)	29	123
Primary Vaccination against Smallpox	250	774
Boosters - Tetanus	9	20
Triple	679	1724
Re-vaccination	19	14

The above figures refer to Slough only. The information concerning poliomyelitis protection which follows in a later paragraph is for the whole of the South Bucks Area.

### DIPHTHERIA

The number of children receiving adequate primary protection against diphtheria was 1,110 compared with 958 in 1963. I can never be satisfied with anything less than complete protection for all but it is pleasing to find some increase over the preceding year although the pleasure is largely reduced by knowing that over 130 more babies were born in 1964 than in 1963. Education, propaganda, work and persuasion are all needed if we are to have enough protective measures carried out to prevent outbreaks of diseases which, although apparently extinct, are in fact lurking in the background and burst out from time to time when immunisation rates fall too low. Diphtheria is

fortunately now a matter of history in many places but it makes the acceptance of immunisation by parents all the more difficult.

The number of boosters, 1724 compared with 679 in 1963 is, however, very encouraging.

### WHOOPING COUGH

Because much greater use is now made of compounded vaccines the number of children protected against whooping cough was also over a thousand - 1,052 to be precise. Protection given by immunisation is not quite so absolute as it is with the other diseases, probably in the region of 80% - and the continued yearly reporting of a small number of cases of whooping cough - between 20 and 60 - is clear evidence that the disease is still with us. In the majority of cases the condition is not severe but small babies may suffer permanent damage. If a greater proportion of children were given protection the disease might well disappear even although individual protection was not absolute.

1,724 children received topping-up doses.

### TETANUS

As I have reported previously more and more children are receiving protection against tetanus mainly because protection is offered with that against diphtheria and whooping cough in a combined vaccine. Tetanus immunisation in fact heads the list of primary immunisations, with a total in 1964 of 1,132.

If children are given the primary course and this is followed by a booster dose six months later then all that is needed in case of future accident is one further booster dose of harmless tetanus toxoid. Neglect of active protection against tetanus in childhood means that tetanus anti-toxin which can cause quite serious reactions may have to be given after accidents later in life. 1,744 children received the necessary booster against tetanus.

### SMALLPOX

Because smallpox occurred in England and Wales in 1962 the number of vaccinations performed was extremely high - 2,261 primary and 821 re-vaccinations. There was a great reduction in 1963 when only 250 primary and 19 re-vaccinations were done. In addition to this there was a re-timing of primary vaccination so that it now takes place during the second year of life instead of shortly after birth.

In 1964, 774 primary vaccinations and 14 re-vaccinations were performed.

## VACCINATION AGAINST POLIOMYELITIS

I am pleased to say that protection against poliomyelitis continued to be very popular and the decrease in the number protected in 1964 probably means that the vast majority of children, except the newly-born have now been given the appropriate vaccine. As vaccination against poliomyelitis is given either by mouth, or sometimes by injection with other protecting agents it is probable that a high proportion of children will be given protection and that general immunity against this disease will remain high.

	1963	1964
Two injections of Salk	214	108
Third injection of Salk	475	500
Three doses of oral	3,503	2,980
Oral boosters	1,786	1,009

## TUBERCULOSIS

### (a) New Cases

- (i) *Pulmonary Tb.* As will have been seen in earlier tables and which can be seen again below in greater detail the number of new cases of pulmonary tuberculosis did not follow the downward trend in 1964: the greatest increase occurred in men from 25 - 45 years of age but women, on the other hand, apparently had a good year.

I mentioned earlier in the report that the Asian population was hardest hit by this condition but a number of new cases may have been diagnosed by the Mass X-ray unit which visited the town in the Autumn.

The Organising Secretary of the Unit reported as follows:

‘We greatly appreciated all the advance publicity you arranged for the Slough College visit; as you know, we were almost too busy there, and we had not met such enthusiastic attendance at public sessions for some time.’

Slough College (General Public)	2,820 X-rayed
Firms outside Trading Estate	
(9 sites)	2,857 X-rayed
Firms on Trading Estate	
(22 sites)	13,097 X-rayed
	19,764



There is a great number of people who come into the town for shopping and for work and it must not be assumed that all those x-rayed were inhabitants of Slough. The number of volunteers is, however, very gratifying.

As a result of the survey, 17 active and 12 observation cases of pulmonary tuberculosis were discovered and in addition, the diagnosis of lung cancer was confirmed in four people.

- (ii) *Non-Pulmonary Tb.* The number of non-pulmonary cases is always much lower than the chest ones but the eradication of tuberculosis from various other sites of the body seems to be equally difficult.

There was an increase of notifications among males in 1964 and again it occurred in the 25 - 45 age group.

The following table gives details of the age and sex incidence of all new cases of tuberculosis notified during the year.

Age in years	PULMONARY		NON-PULMONARY	
	Males	Females	Males	Females
0 -	1	1	-	-
1 -	3	2	-	1
15 -	2	1	2	1
25 -	13	4	6	1
35 -	7	4	2	1
45 -	5	1	-	1
65 and over	3	-	-	-
TOTALS	34	13	10	5

#### (b) Notification Register

If the number of new cases was disappointing - the number of cures was very pleasing. The number of names remaining on the register varies a little because there is a number of movements in and out of the town but this variation is very small, and the great reduction of names on the register was due to cures in the pulmonary group.

PULMONARY						NON-PULMONARY					
Males		Females		Total		Males		Females		Total	
1963	1964	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964
496	420	387	302	883	722	57	62	54	52	111	114



**(c) B. C. G. Vaccinations**

Of a total of 1,854 children eligible for B.C.G. vaccination 1,513 accepted the test to determine sensitivity to tuberculosis: this is an acceptance rate of 81.6% - the highest so far achieved - it was 77.5% in 1963 and 77.5% in 1962.

Of the 1,513 tested 62 were absent the following week when reading of the test and vaccination took place. 121 children were found to have a positive reaction to the test and thus to have had previous experience of and some immunity to tuberculosis; the remaining 1,330 were vaccinated. The proportion of children found positive from these tests which were read was just over 8.3%.

The following table shows the details for the past seven years:-

<i>Year</i>	<i>No. Tested</i>	<i>No. Positive</i>	<i>No. Negative</i>
1958	1,009	116 (11.49%)	893 (88.5%)
1959	937	90 (9.6%)	847 (90.4%)
1960	1,422	74 (5.2%)	1,348 (94.8%)
1961	1,226	132 (10.8%)	1,094 (89.2%)
1962	1,369	113 (8.25%)	1,256 (91.7%)
1963	1,310	60 (5.3%)	1,129 (94.7%)
1964	1,513	121 (8.3%)	1,330 (91.7%)

**(d) Deaths from Tuberculosis**

There were four deaths from Pulmonary Tuberculosis and none from the Non-Pulmonary form of the disease.

TUBERCULOSIS																				
YEAR	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964										
POPULATION	67,940	69,190	71,560	73,620	75,450	77,410	80,690	82,700	84,210	84,900										
P - PULMONARY																				
N.P. - NON-PULMONARY	P	N.P.	P	N.P.	P	N.P.	P	N.P.	P	N.P.	P	N.P.	N.P.							
CASES NOTIFIED	93	11	57	12	36	6	48	9	40	7	51	5	53	5	38	9	35	9	47	15
NOTIFICATIONS PER 1,000 OF POPULATION	1.36	0.16	0.82	0.17	0.50	0.08	0.65	0.12	0.53	0.09	0.63	0.07	0.60	0.06	0.45	0.11	0.42	0.11	0.55	0.18

# DEATHS FROM TUBERCULOSIS

Year	Population	Pulmonary		Non-Pulmonary		Pulmonary Death Rate per 1000 Population
		Males	Females	Males	Females	
1955	67,940	5	3	-	1	0.12
1956	69,190	7	1	1	-	0.12
1957	71,560	4	1	-	-	0.07
1958	73,620	4	-	1	1	0.05
1959	15,450	7	-	1	1	0.09
1960	77,410	2	1	-	1	0.04
1961	80,690	5	-	-	1	0.06
1962	82,700	2	2	-	-	0.048
1963	84,210	1	2	-	-	0.036
1964	84,900	3	1	-	-	0.047

## MATERNITY AND CHILD WELFARE

The following table shows the location of the various child welfare centres in and around Slough.

	<i>Mondays</i>	<i>Tuesdays</i>	<i>Wednesdays</i>	<i>Thursdays</i>	<i>Fridays</i>
WEEKLY	Health Centre Burlington Road.  St. Michael's Community Centre, Farnham Road.	Langley - Parlaunt Park (all day)  Britwell.	Merrymakers Hall, Langley (all day)  Burnham..	Health Centre, Burlington Road.  Lent Rise.   Farnham Royal.	Health Centre, Burlington Road.  Wexham Court.  Cippenham.  Britwell.
TWICE MONTHLY	Farnham Common.	Stoke Poges.  Colnbrook.	Datchet.		

## HOME SAFETY

Home Safety education continued throughout the year; posters, pamphlets, talks and films all playing a part in the campaign.

Following the appointment of a Home Safety Officer the work of home safety already undertaken by officers of the Borough and County Health Departments was considerably extended; this Officer has given talks supported by visual aids such as films and film strips on forty-one occasions to ante-natal groups, classes of senior school girls, old people's groups, mothers' clubs and various other women's groups.

A register of home accidents in Slough has been established from information made available by the Upton Hospital authorities and is being used to supply additional information for local home safety propaganda.

The Home Safety Council and the Health Department of the County Council jointly sponsored a combined home safety/smoking and health exhibition at Agar's Plough during the August holiday carnival week. The theme of home safety was dealt with by this Council and that of smoking and health by the County Council. The marquee in which the exhibition was housed being divided into



two parts, one part was devoted to the back projection of two films 'How to Have an Accident in the Home' and 'Smoking and Health' and the remainder of the marquee was occupied by a static exhibition. The exhibition was well supported with the biggest attendances being noted on the two Saturdays and Bank Holiday Monday when an hour's check revealed a total of 604 people entering the tent.

Other activities of the Home Safety Council included two poster campaigns, one on the dangers of fire works and the other on falls in the home; a leaflet explaining the dangers of oil heaters was printed in Urdu and distributed to the Asian immigrants of the town; a letter was sent to organisers of jumble sales requesting them not to sell dangerous goods such as defective oil heaters and offering to advise in case of doubt.

The film commissioned by the Council on the subject of poisons in the home reached the final stages and will be ready for release under the title of 'Dead Easy' in 1965.

### HEALTH EDUCATION

I am grateful to Miss B.R. Keene, the Area Health Education Organiser for the following information on the Health Education programme carried out in this town during 1964, when there was an expansion of the Health Education service, the main topics being Smoking and Health, Dental care and Oral Resuscitation.

**Anti-Natal Classes:** These remained extremely popular and were attended by the majority of young women expecting their first baby who were booked either for home or hospital confinement. A record number of expectant fathers and mothers attended the evening film shows, 402 men (384 in 1963) and 424 women (394 in 1963).

**Mothers' Clubs.** have had another successful year and membership continues to increase. The main theme of study for the year was 'Safety for the Young Child' which was considered from many different angles including home, road and water safety. The quarterly Newsletter published by the local clubs continued to attract a wide range of contributions including articles on 'The History of South Bucks' by Aldermen Robert Taylor; 'Nursery and Infant Schools' by Mr. C.S. Smyth, Borough Education Officer, and 'Race Relations - Problem or Challenge' by W.H. Israel, General Secretary, Slough Council of Social Service.

**Health Teaching in Schools:** A full dental health education programme was undertaken in Primary and Secondary Schools with the help of the dental auxiliary. Smoking and Health was the other main topic and aroused much discussion especially with secondary school audiences.

**Oral Resuscitation** was demonstrated after school hours to 6 groups of Junior School staff and there were 19 other demonstrations in the Borough to audiences which included Police, Ambulance Staff, Senior Scouts etc. The new manikin has proved most valuable in demonstrating external cardiac massage to groups who need this special instruction.

**Exhibitions:** Regular 6 - weekly poster campaigns have continued in Child Welfare Clinics, Nursery Schools and other appropriate places, on Dental care, immunisation, foot health, posture etc. Where possible these campaigns have been timed to coincide with National Campaigns.

During the Autumn a set of coloured transparencies were made to show the Health and Welfare services available to old people living in this locality. I am indebted to all the old people, the members of the staff of the Health and Welfare Departments and other volunteers who co-operated in this venture.

Health Department staff met on two occasions to review new films dealing with various aspects of health including Venereal Diseases, Growing Up and Food Hygiene; lively discussions followed the showing of the films which were seen by about 60 people on each occasion.

#### FAMILY PLANNING CLINICS

The following clinics are held locally:-

Upton Hospital	Monday and Tuesday	6 - 7.30 p.m.
Ante-Natal Clinic	Wednesday	9.30 a.m. - 10.30 a.m.
Burlington Road	Friday evening by appointment only	

#### DAY NURSERY

Children from 0 - 3 years are cared for daily at the Manor Park Day Nursery.

The Nursery is situated at:-

Penn Road, Manor Park, Slough

Applications for admission should be made to the Area Medical Officer.

#### RESIDENTIAL NURSERY AND CHILDREN'S HOMES

Residential accommodation for children needing care by the local authority is supplied by the Children's Department of the Bucks. County Council at Brookside Residential Nursery, Salt Hill;

Manor Lodge, Mildenhall Road; 'Elmside', 1, Upton Road; Bilby House, 55, Langley Road and Brondeg, 320, Stoke Poges Lane.

Brookside cares for children under 5 years of age, and Manor Lodge for those who have reached school age. Elmside looks after boys aged between 15 and 18 years. Bilby House and Brondeg are cottage type homes taking eight and nine children respectively.

Accommodation is restricted and although it is always hoped a place will be available for urgent cases, no guarantee that a child can be admitted to a particular nursery or hostel can be given.

Applications should be made to the Children's Officer, 5, Buckingham Road, Aylesbury.

### HOSPITAL SERVICE

The Borough of Slough is served by the following hospitals and maternity homes.

#### General Hospitals

Upton Hospital, Albert Street  
King Edward VII Hospital, Windsor  
Canadian Red Cross Memorial Hospital, Taplow  
Old Windsor Hospital, Old Windsor

Work continued during the year on an entirely new general hospital at Wexham Park.

#### Infectious Diseases

Maidenhead Isolation Hospital  
St. John's Hospital, Uxbridge

#### Venereal Diseases

The nearest treatment centres are:-

King Edward VII Hospital, Windsor  
Royal Berkshire Hospital, Reading  
Hillingdon Hospital, Hillingdon

#### Tuberculosis

- (1) *Chest Clinic*. The Chest Clinic is at Upton Hospital, Albert Street, Slough. All arrangements are made by the Chest Physician, who is available at the Hospital (Tel. No. SLOUGH 23261).

- (2) *Hospital Treatment for Chest Diseases*. All admissions are arranged by the Chest Physician, Chest Clinic, Upton Hospital, Slough.

### **Maternity Accommodation**

Upton Hospital, Albert Street, Slough  
Canadian Red Cross Memorial Hospital, Taplow  
Colinswood Maternity Home, Farnham Common  
Old Windsor Hospital, Old Windsor  
Princess Christian Maternity Home, Windsor

If the patient's own doctor thinks that admission should be made on medical grounds, the patient is referred to the nearest ante-natal clinic, but if admission is sought on domiciliary or social grounds, application is made through the Area Medical Officer, who makes his recommendation to the Hospital Management Committee following a report on home circumstances made by the Health Visitor.

### **Part III Accommodation**

Aged Persons	Sick	Upton Hospital
	Non-Sick	Upton Towers
		Upton Hospital
		Wexham Court Hostel
		Gurney House.

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# ANNUAL REPORT

OF

THE CHIEF PUBLIC HEALTH INSPECTOR  
(Leslie A. Stroud, D.P.A., F.R.S.H., F.A.P.H.I.)

for the year 1964

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Section A - General Administration  
Section B - Housing  
Section C - Safeguarding of Food Supplies  
Section D - Clean Air  
Section E - Factories, Workplaces and Shops  
Section F - Pest Infestation Control  
Section G - Miscellaneous

## SECTION A

### GENERAL ADMINISTRATION

TABLE NO. 1

#### Summary:

Total Inspections	....	....	...	...	17,799
Complaints received and investigated			...		1,034
Preliminary Notices served	...	...	...		149
Secondary Notices served	...	...	...		23
Statutory Notices served	...	...	...		38
Letters received	....	...	...	...	8,948
Letters despatched	...	...	...	...	7,522
Interviews with Property Owners, Agents and Builders etc.	...	...	...	...	1,252

TABLE NO. 2

#### Analysis of Inspection Work performed by the Technical Staff:

Housing	...	...	...	...	...	2,403
Inspection of Meat and Other Foods, Food and Drugs, etc.	...	...	...	...		1,381
Premises at which Food is prepared, stored or sold	...	...	...	...	...	1,323
Dairies	...	...	...	...	...	69
Factories, Workplaces and Offices	...	...	...	...		354
Shops	...	...	...	...	...	743
Clean Air	...	...	...	...	...	3,608

TABLE NO. 2 (contd)

General Sanitation	...	...	...	...	2,993
Pest Infestation Control	...	...	...	...	1,986
Miscellaneous Matters	...	...	...	...	943

TABLE NO. 3

**Premises at which Improvements were effected:**

Dwelling Houses	...	...	...	...	...	117
Premises used for Preparation and Sale of Food						30
Factories and Workplaces	...	...	...	...		15
Shops	...	...	...	...	...	9
Drainage (reconstruction, repair etc.)					...	57
Miscellaneous	...	...	...	...	...	6

**S E C T I O N    B****HOUSING****Clearance**

No further areas were dealt with during 1964 and little progress was made with the vacation and demolition of those properties covered by clearance and compulsory purchase orders operative before the start of the year. Of nearly 160 houses outstanding, 10 were vacated, and only 2 demolished.

Many of these outstanding houses have been dealt with by compulsory purchase orders and due to protracted negotiations delays of up to two years are being experienced before the properties are finally acquired by the Council and rehousing can be considered. As the law now stands if the occupants of such houses are rehoused before the Council has control of the property there is no legal provision to prevent re-occupation. This seems to be a point which deserves attention from the legislators.

**Repair and Maintenance of Dwelling Houses**

During the year, 75 complaints were received by the department with respect to disrepair in dwelling-houses. The District Public Health Inspectors made 1,058 visits to houses for initial inspections and re-inspections to secure compliance with notices served, and to supervise repair works. In addition a considerable number of visits was made in connection with the maintenance of reasonable conditions in houses in multiple occupation.

In connection with the work under the Housing and Public Health Acts, 38 statutory notices, 149 preliminary notices and 47 requisitions for information as to ownership of premises were served during 1964.

No works were carried out by the Council in default of action by owners.

### **Housing Improvement Grants**

One application for a discretionary grant was received during the year, but had to be refused by the Borough Council because of the possibility that the house would be affected by planning proposals within fifteen years.

Forty-two applications for standard grants were received and a total of £4,480 was paid in standard grants during the year.

For several years, improvement grants have been dealt with by a Sub-Committee of the Building Works Committee, but it was found that nearly all applications were for standard grants and these had to be approved because they fulfilled statutory requirements; for this reason the Sub-Committee had virtually no duty to perform and the Borough Council decided that, as from the beginning of the municipal year in 1964 the Town Clerk and the Chief Public Health Inspector should be authorised to consider and approve all applications for standard grants and should report the details of grants approved to the Building Works Committee. All applications for discretionary grants were to be dealt with by submission to the Building Works Committee.

These delegated powers to the officers mentioned have resulted in a considerable speed-up of the entire process and in several instances the application has been approved and the work carried out before the committee has met.

Since the inception of improvement grants in 1949 there has been quite a number of changes. The original procedure was cumbersome and the process was long drawn out. Some local authorities, Slough being one of them, agreed to accept applications but some authorities declined to accept any applications. The result was unsatisfactory, the response from the public was poor and the system lacked impact and despite widespread publicity there were still large numbers of people who had but a hazy knowledge of the system, some being completely unaware of its possibilities.

This unsatisfactory system continued with little change for ten years until standard grants were introduced and local authorities were compelled to approve applications for grants towards installation of amenities to a minimum standard. This brought about a degree of uniformity between neighbouring authorities and an increase in the number of houses improved. The procedure was much simpler yet there was little difference in the type of improvements carried out with the aid of standard grants than there was originally under the old system, that is, generally speaking, the provision of bathrooms, indoor toilets and hot-water supplies.



Despite the increase in the number of applications, the Government was still dissatisfied with the response. The Housing Act, 1964 was brought into force during the latter part of the year and with it a degree of compulsion hitherto absent, the purpose of which is to secure that within the next ten years most of the two million older, but still sound, houses in the country with a useful life ahead of them will have been provided with the basic standard amenities. With this end in mind, local authorities have been given the duty of causing the inspection of their areas to establish what are known as 'improvement areas' and then to enforce the improvement of the tenanted houses in those areas. Provision is also made for the compulsory improvement of houses outside improvement areas where the tenant requests it, but where the landlord has refused.

There has been little change in the existing scheme of discretionary grants, but the existing standard grant scheme has been altered slightly to make improvement grants more attractive and to encourage more owners to improve their dwellings.

### **Overcrowding**

Statutory overcrowding continues to be found and 335 visits were made to investigate alleged overcrowding, almost invariably to houses in multiple occupation. A further 26 notices under Section 90, Housing Act, 1957 were served on persons having control of multi-occupied houses, limiting the number of occupants for each room and for the house as a whole. These notices certainly are effective in the properties they specifically refer to, and coupled with legal proceedings where contraventions have been found, have had some effect on the overall situation. The gross overcrowding found a short time ago is now less common, though overcrowding to a lesser degree due to family occupation of a single room is all too familiar.

Two prosecutions were taken for contravention of Section 90 notices. The respective defendants both pleaded guilty and fines and costs totalling £23. 8. 0d. and £15. 5. 0d. were imposed.

In the case of a second floor flat found to be grossly overcrowded by a married couple and their six children the owner took court action for possession following notice from the local authority under Section 78(5) Housing Act, 1957. The sequel to this has been that the County Court in making a possession order gave the tenant six months security of tenure, thereby prolonging for that further period the occupiers obvious contravention of the overcrowding provisions of the Housing Act, 1957.

### **Houses in Multiple Occupation**

The number of houses in the Borough in multiple occupation continues to increase. The total is unlikely to be accurately assessed unless a scheme of registration of such houses is instituted, as provided for in the Housing Act, 1961.



The Housing Act, 1964 has provided a useful power to limit the number of households in relation to additional facilities provided and it is hoped in the immediate future to use this to some effect on a number of multi occupied houses. It is a sobering thought that the use of an ordinary three-bedroom house as only two lettings (ground floor and first floor) is an improvement which we are hoping eventually to achieve.

A considerable number of cases arise where those parts of a house used for communal purposes by a number of tenants are found to be in a very dirty condition. The owners of the houses have responded to notices requiring works of cleansing and redecoration and it has not so far been considered necessary to impose formal management orders. It is, however, surprising how bad conditions can be come in some of these houses before one of the tenants finally complains to the local authority. There is no doubt that conditions in which they live have an insidious effect resulting in a gradual lowering of standards.

Increased interest is being shown by the Government in immigrant housing and it will be interesting to see whether any specific aid will be forthcoming for those areas such as Slough which have this particular problem.

#### **Council Housing Estates**

- (a) *Allocation of Council Houses*. Seventy inspections were made by the District Public Health Inspectors for the purposes of ascertaining the existence of insanitary or sub-standard conditions of houses occupied by applicants under the Council's Housing Points Scheme, to enable a recommendation for award of points under this heading to be made.
- (b) *Council Housing Estates*. Liaison is maintained with the Housing Department on various matters concerning Council Estates and other Corporation property. Numerous visits of inspection of such properties were made by the District Inspectors in connection with structural defects, rodent control, vermin, etc.

#### **Caravans**

##### *Residential Sites*

Three residential sites within the Borough are the subject of action under the Caravan Sites and Control of Development Act, 1960.

The Brook Path Site is being run-down and only two caravans are now stationed there. As these become vacant or are removed from the site they will not be replaced.

An extension of time in which the site licence conditions should be fully complied with was granted to the Ditton Park Road site as shortage of labour had made it impossible for the required works to be completed within the period originally specified. Works were in progress towards the end of the year and it is to be hoped that this site of eight caravans will meet the licence requirements in the very near future.

The larger site at Foxborough Farm, Langley with 83 vans, is also being brought up to the model standards specified by the Ministry of Housing and Local Government. In this case a further time for the completion of the required works has been allowed and the outstanding work will have to be carried out during 1965.

There is also a number of licensed sites for individual caravans scattered throughout the Borough. These are maintained to a satisfactory standard by periodic inspections by the district inspectors.

### *Itinerant Caravanners*

Touring or camping caravanners naturally are little seen in the Borough but considerable nuisance still arises from the gypsy caravan, now usually of a trailer type and towed by a lorry. The new road from Market Lane to Chequers Bridge and the fencing of the adjacent land has lessened the camping and consequent complaints from this area. Nevertheless throughout the year on numerous occasions in various parts of the Borough the Council was obliged either to remove vans themselves from land under their control or to arrange for the owners of the land to remove their unwanted and unwelcome visitors. Fences and other physical barriers have no effect in keeping these people out if they fancy a particular camping ground, so nothing can be done until they are there, and the business of arranging towing-off has to be gone through time after time. This is one problem against which I feel any attempt to legislate effectively will fail.

### **Rent Act, 1957**

Only two applications were received for certificates of disrepair during the year, and in both cases undertakings to do the necessary repairs were given by the owners and accepted by the Council. From time to time tenants request information concerning the action they can take under the Rent Act, 1957 to obtain the repair of their houses, but very few are prepared to make the small effort required of them to initiate this action.

If any real effect is to be achieved by future legislation replacing the Rent Act, 1957 the responsibility for initial action must be placed with the local authority.

## **Information re Local Land Charges etc.**

Information as to statutory orders made in respect of dwellinghouses and non-complied-with notices requiring works of disrepair was supplied in respect of 1,743 properties upon a request for official search of the Land Charges Register.

In addition, particulars as to properties were supplied in all cases in which mortgages were being arranged under the Housing Acts, in respect of the purchase of small dwellings. A number of requests for information was dealt with during the year as to whether properties changing hands were included in the Borough Council's Programme of Housing Clearance.

## **S E C T I O N   C**

### **SAFEGUARDING OF FOOD SUPPLIES**

The law provides for the safety and cleanliness of food supplies by making everyone concerned with its handling responsible to the general public.

In attempting to see that all food handlers undertake these heavy responsibilities Public Health Inspectors regard this work as perhaps the most important of all their duties and one to which constant attention must be given.

The activities of the Department in relation to food may be classified under these headings:- the hygiene of preparation, handling and display, inspection and compositional standards.

#### **Food Hygiene**

The problems of food hygiene are wide and complex. They concern layout of premises, design of equipment and methods of management. Controlled temperature of storage of food, cleanliness and sterilization of equipment, refuse disposal and insect control are all matters of great importance. In short, the food handler must do nothing that is likely to endanger the health of the customer.

During 1964, 2,704 visits of inspection were made by the Public Health Inspectors to food premises within the Borough including food factories, catering establishments, factory and school canteens, bakeries, dairies, manufacturers and retailers of ice cream, markets, licensed premises, meat, fish, grocery and other retail shops. School kitchens and canteens in Council and private schools were regularly inspected throughout the year.

During 1964 food hygiene standards were found to be high in most cases but there were some instances where the premises were unsuitable. In such cases every effort is made to improve



physical conditions and in this respect many improvements were effected during the year.

The Public Health Inspectors advise managers of food premises on matters of hygiene practices in food handling, preparation and storage. The general shopping public can make an equal contribution by being more critical of unhygienic practices and by avoiding food premises where such conditions are apparent.

The Health and Sanitation Committee authorised legal proceedings in three instances in respect of food found to be contaminated or otherwise unsound.

### **Milk Supply**

The register of Dairies and Distributors of Milk (other than dairy farms and farmers) kept in the Department showed the following licences at the end of 1964:-

Dealer's (Pasteuriser's) Licences	...	...	2
Dealer's (Pre-packed Milk) Licences	...		
Tuberculin Tested	...	...	33
Pasteurised	...	...	58
Sterilised	...	...	66

Since June, 1962, all milk sold retail in England and Wales must normally be "specially designated" milk, that is "pasteurised", "sterilised" or "tuberculin tested". The specification of areas whereby the use of the special designations for milk was made obligatory began in 1951 and in the Borough all milk sold retail has for some years been in accordance with special designations. Therefore all milk sold within the Borough must be either heat-treated (pasteurised or sterilised) or tuberculin-tested, and this includes milk sold from automatic vending machines.

Two dairies in the Borough receive bulk milk from various suppliers for heat treatment and bottling and two others receive milk already bottled for local distribution. All are visited regularly by the Public Health Inspectors and 137 samples were taken by these officers for laboratory examination to ensure the efficacy of heat treatment. During the year 69 visits were made to registered premises.

Both dairies continue to operate their own control laboratories to maintain a constant check on the quality of the milk they receive and I am pleased to report the willing and useful co-operation of the laboratory personnel with the Officers.

### **Bacteriological Examination of Milk**

During 1964, 174 samples of milk of various designations were procured for bacteriological examination. The details are shown in Table No. 4. All the samples passed the prescribed tests.



TABLE NO. 4

BACTERIOLOGICAL EXAMINATION OF MILK	
CLASSIFICATION	NO. OF SAMPLES
Pasteurised Milk	82
Tuberculin-Tested (Pasteurised) Milk	55
Tuberculin Tested Milk	31
Sterilised Milk	6

### Manufacture, Storage and Sale of Ice Cream

Section 16 of the Food and Drugs Act, 1955 requires that all premises used for the sale, the manufacture for the purpose of sale, or the storage of ice cream intended for sale, shall be registered with the Local Authority.

During 1964, 5 additional premises were registered for the sale of ice cream; 79 visits were made to registered premises and 52 samples of ice cream were taken for bacteriological examination with the following results:-

TABLE NO. 5

METHYLENE BLUE REDUCTION TEST	
PROVISIONAL GRADE	SAMPLES
1) satisfactory	51
2) unsatisfactory	1
3)	
4)	

Attention has been given during inspections to the requirements of the Ice Cream (Heat Treatment) Regulations in the case of manufacturers and supervision has been maintained in the case of retailers, particularly itinerant vendors whose standards were generally satisfactory.

### Preparation and Manufacture of Preserved Foods

At the end of 1964, 66 premises in the Borough were registered in pursuance of Section 16 of the Food and Drugs Act, 1955 in respect of the manufacture of preserved foods as follows:-

Canning Factories	...	...	...	...	1
Preparation of Shell Fish	...	...	...	...	2
Fish Friers	...	...	...	...	15
Manufacturers of Sausages and cooked meats					48

### Municipal Abattoir

In May, 1963 the Ministry of Agriculture, Fisheries and Food referred to the Minister's desire that all slaughterhouses should comply with the new standards of construction and hygiene at the earliest possible moment. It was further stated that the number of districts where this was not the case was rapidly diminishing and some evidence of progress was needed, therefore, if both the Minister and the Council were to be free from criticism.

In July, 1963 the Borough Council approved a proposed site at Chalvey on land in the ownership of Eton College and felt that if for any reason this site was considered to be unsuitable, another attempt should be made in respect of the site proposed in 1961 on land near Cippenham Lodge on the South side of Cippenham Lane. (In May, 1961 the Minister refused permission on the application of the Borough Council for the erection of a Municipal Abattoir on this site.) Applications for planning permission were made in respect of these two sites but no decision was made. In November, 1963 the Borough Council appealed to the Minister against the failure of the local planning authority to give notice of its decision on these two applications within the prescribed period.

In September, 1964 outline planning permission was given by the Minister of Housing and Local Government in respect of the Cippenham site and soon after that date a start was made on the design and planning of a new abattoir. Discussions have taken place with officers of the Ministry of Agriculture, Fisheries and Food and it is hoped that the new premises will be completed and ready for operation in the summer of 1967.

During the year the slaughtering of animals for human consumption showed a slight decrease. A Public Health Inspector is in full time attendance at the Abattoir to supervise the running of the premises generally, and in particular to examine the carcasses and offals of all animals slaughtered.

The Abattoir facilities are available from Monday morning to Saturday noon inclusive. Slaughtering on Saturday afternoon and Sunday is not permitted except on special occasions. The premises are opened at 7.00 a.m. and closed as required up until 8.00 p.m. according to seasonal demands.

The following figures show the throughput of animals since the Borough Council took over the premises as a Municipal Abattoir in 1954.

TABLE NO. 6

	<i>Cattle</i>	<i>Sheep &amp; Lambs</i>	<i>Pigs</i>	<i>Calves</i>	<i>Total</i>
1954	2,977	5,351	3,460	1,078	12,866
1955	2,040	3,721	5,662	1,073	12,500
1956	1,990	3,736	4,854	1,135	11,715
1957	2,475	4,380	6,608	1,121	14,584
1958	3,370	5,585	8,683	987	18,625
1959	3,393	9,733	8,432	929	22,487
1960	3,764	6,898	8,281	1,083	20,026
1961	4,512	10,744	10,256	1,234	26,746
1962	4,205	11,477	13,312	1,142	30,136
1963	3,873	11,970	14,034	882	30,759
1964	4,143	9,237	14,602	778	28,760

During the financial year ending 31st March, 1965 tolls for the use of the abattoir amounted to £3,860. This shows a decrease over the previous year of £210.

#### **Slaughter of Animals Act, 1958**

In pursuance of the above Act, the Borough Council licensed 14 persons engaged in the slaughter of animals for human consumption.

No contraventions of the Act were observed in the use of the electrical and captive bolt stunning apparatus, both of these methods being efficient and humane.

The slaughtermen have performed their duties in the usual efficient manner and to the satisfaction of the trade. Public Health Inspectors on full time duty at the abattoir are vigilant regarding the habits and methods of food handlers and persons using the premises are mindful of this fact; they generally react favourably to any minor food hygiene lecture that might be delivered on the spot.

#### **The Inspection of Meat and Other Foods**

One hundred per cent inspection of all carcasses and offals of animals slaughtered at the Municipal Abattoir was achieved by the Inspectors on duty. Each of the Inspectors carrying out this



work possesses the Certificate of the Royal Society of Health for the inspection of meat and other foods.

Table No. 7 gives particulars of carcasses examined and rejected as unfit for human consumption.

### **The Meat Inspection Regulations, 1963**

These Regulations which came into operation on 1st October, 1963 replace the Public Health (Meat) Regulations, 1924 to 1952. The main provisions are that, except where the regulations permit, carcasses of animals slaughtered for sale for human consumption must not be removed from the place of slaughter until they have been inspected, passed as fit for human consumption and marked in the manner prescribed in the regulations.

Schedules to the regulations contain provisions as to the manner in which inspectors are to carry out inspections and as to the circumstances in which meat is to be regarded as unfit for human consumption.

Four hundred and forty-seven visits were made during 1964 to wholesale and retail food premises for the purpose of examining other foods. As a result of these visits over seventeen tons of food, considered to be unfit for human consumption, was voluntarily surrendered to the Corporation and destroyed.

Details of these foods are as follows:-

					<i>Weight in lbs.</i>
Canned foods	...	...	...		36,566
Imported meat	...	...	...		1,575
Manufactured meat products	...				571
Fruit	...	...	...	...	241
Fish	...	...	...	...	98
Cereals	...	...	...	...	69
Cheese and Butter	...	...			66
Preserves	...	...	...		10
Miscellaneous	...	...	...		251

### **Disposal of Unsound Food**

Carcasses and offal rejected as unfit for human consumption are disposed of by two methods:-

- (a) Permission has been given to the Slaughtering Contractor to sell to approved collectors, on behalf of the owners,



such rejected meat as the Inspecting Officer considers suitable for sterilisation and processing into animal feeding stuffs and fertilizers.

- (b) Rejected carcasses and offal not considered suitable for processing are destroyed.

Other foodstuffs are collected and disposed of by tipping.

### **Hygiene of Meat Transport**

No legal proceedings were necessary under this heading due to the regular observations kept by the District Public Health Inspectors. It has been necessary in a limited number of cases to issue warnings where the standards of cleanliness both in regard to vehicles and protective clothing were not considered adequate, these warnings have proved effective.

### **Food Hawkers**

Vehicles and storage places used by these traders are regularly inspected under the provisions of the Food Hygiene (General) Regulations, 1960.

The registration by the Borough Council of hawkers of certain classes of food has been compulsory since 1959, when section 115 of the Slough Corporation Act, 1949 was implemented.

At the end of 1964 there were 44 hawkers on the register.

## **FOOD AND DRUGS**

### **Compositional Standards and Quality**

Four hundred and fifty-eight samples of food and drugs were procured during the year, of which two hundred and three were submitted to the Public Analyst, the results being summarised in Table 9. One hundred and fifty-five samples of milk, fifty samples of ice cream and fifty samples of spirits were tested in the department.

Samples of milk from single churns in several consignments coming into the local dairies were found to be slightly deficient in fat or non-fatty solids content although the aggregate content of the total number of churns in the respective consignments was found to be satisfactory. The average of all milk samples during the year was found to be 3.61% fat and 8.54% non-fatty solids. All the samples of ice cream and spirits were found to be satisfactory and no case of adulteration of milk consigned into the Borough was detected. Contact was maintained as usual with local food manufacturers and samples were submitted to the Public Analyst on an informal basis as a routine check. Numerous

questions were resolved relating to labelling of products under Food and Drugs Legislation and the Pharmacy and Medicines Act, 1941.

### **Complaints relating to Food**

The steady and definite increase in numbers of food complaints noticeable over the past few years has shown no signs of diminishing. On the contrary, the trend appears to be higher still - in fact the one hundred and twenty-nine complaints received during 1964 just exceeded the combined total of the preceding two years. It was significant that forty-four of these complaints were received during June and July - the period immediately following the outbreak of typhoid at Aberdeen with its widespread publicity and repercussions. A number of complainants did, in fact, refer to this outbreak rather apologetically, as if they would otherwise not have bothered to come to this office, even though the food of which complaint was being made bore little or no connection with the corned beef of Aberdeen. Following this outbreak and as a result of information received from the Ministry of Health, contact was made by inspectors with all the known food establishments in the Borough in order to ascertain whether six-pound cans of corned beef bearing certain identifying marks were held on the premises, in order to ensure that these were withdrawn from sale pending further investigations.

It is known that there are many instances where complaints regarding food are never made by customers because they 'cannot be bothered', and many complaints are quite naturally made direct to the shop or dealer so that we in this department never get to hear of them. Quite often when making an official complaint to this department, people admit that they did so only because it is the second occurrence within a short time that they have been dissatisfied with a particular food or shop in one way or another. It is therefore obvious that there must be many more dissatisfied customers than is indicated by the number of complaints actually made.

Meat and meat products were responsible for forty-six of the complaints, bread for nineteen and milk and milk bottles for thirteen. Several cases came to light where mouldy meat pies were sold despite exhortations from inspectors recommending retailers to code all wrapped meat products on delivery by their suppliers. Too often it is found that pies are received, mixed with older stock and sold in a somewhat haphazard manner, even though the manufacturers recommend that their pies be withdrawn from sale after forty-eight hours even when kept under optimum conditions. These same optimum conditions are unfortunately sometimes lacking and retailers have been known to be quite ignorant of the manufacturers' recommendations. Various arguments have been put forward in recent years advocating legislation which would prescribe compulsory date-marking of pre-packed foods but this matter is still left with the trade.

Three prosecutions were instituted following complaints relating to food. A firm was fined £50 for selling a mouldy loaf which was unfit for human consumption and a further £50 for having a similar loaf in their possession intended for sale.

A charge against a butcher alleging the sale of a chicken which was de-composing and unfit was dismissed, but he was fined £30 for exposing for sale and having in his possession for sale, food which was unfit and a further £35 for offences under the Food Hygiene (General) Regulations

A large bakery firm situated outside the Borough was fined £25 for selling a bread roll containing a spent matchstick.

TABLE NO. 7

## SLOUGH MUNICIPAL ABATTOIR

Summary of Carcasses Inspected and Condemned					
	CATTLE EX. COWS	COWS	SHEEP & LAMBS	PIGS	CALVES
No. of animals slaughtered and inspected ... ..	3,205	938	9,237	14,602	778
<b>Disease except Tuberculosis</b>					
Whole carcasses condemned ...	3	3	5	92	6
Carcasses of which some part or organ was condemned ... ..	639	268	348	1,005	4
% of number inspected affected with disease other than tuberculosis ... ..	20.3	28.9	3.8	7.4	1.4
<b>Tuberculosis</b>					
Whole carcasses condemned ...	-	-	-	-	-
Carcasses of which some part or organ was condemned ... ..	-	2	-	212	-
% of number inspected affected with tuberculosis ... ..	-	0.2	-	1.4	-
<b>Cysticercosis (C. Bovis)</b>					
Carcasses of which some part or organ was condemned ... ..	67	8	-	--	-
Carcasses submitted to treatment by refrigeration ... ..	10	1	-	-	-
Generalized condition whole carcasses condemned ... ..	-	-	-	-	-

TABLE NO. 8

Weights of Condemned Meat						
	TUBERCULOSIS			OTHER DISEASES		
	cwts.	qrs.	lbs.	cwts.	qrs.	lbs.
Carcasses ... ..	-	-	-	123	3	21
Parts of Carcasses and Organs	19	1	19	158	3	1
TOTALS ...	19	1	19	282	2	22
TOTAL WEIGHT 15 tons 2 cwt. 0 qr. 13 lbs.						



TABLE NO 9

## Summary of Food and Drugs Samples submitted to the Public Analyst

FOODS	PROCURED		ADULTERATED	
	Formal	Informal	Formal	Informal
Arrowroot ... ..		1		
Baking Powder ... ..		1		
Biscuits ... ..		7		
Brandy ... ..	2			
Bread ... ..	1	1		1
Breadcrumbs ... ..		1		
Butter ... ..	1	1		
Cashews, salted ... ..		1		
Cereal, creamed ... ..		1		
Cheese ... ..	3	2		
Chicken Stock Tablets ... ..	1	1		
Cider ... ..		1		
Cocktail cherries ... ..	1			
Coffee, Instant ... ..		2		
Coffee & Chicory essence ... ..		1		
Cooking Fat ... ..		7		
Cream ... ..		4		
Custard Powder ... ..		2		
Dripping ... ..		1		
Dumpling mix ... ..	1			
Egg powder ... ..	1			
Fish ... ..	3	17		
Fish spreads ... ..		4		
Flavouring ... ..		1		
Flour ... ..		3		
Flour confectionery ... ..		8		
Fruit ... ..		6		
Garlic powder ... ..	1			
Ginger ... ..	1	1		
Glycerine and rosewater ... ..		1		
Honey ... ..	1			
Ice cream ... ..		2		
Ice lolly ... ..		1		
Lemonade crystals ... ..		1		
Margarine ... ..	1			
Meat products ... ..	5	14		
Medicinal products ... ..		5		
Milk, condensed ... ..		1		

TABLE NO. 9 (cont'd)

Summary of Food and Drugs Samples submitted to the Public Analyst								
FOODS					PROCURED		ADULTERATED	
					Formal	Informal	Formal	Informal
Milk products	...	...	...			1		1
Mustard	...	...	...			1		
Pancake mix	...	...	...		1	1		
Peanut butter	...	...	...			1		
Pickles and sauces	...	...	...		4	9		
Potato, powdered	...	...	...			1		
Preserves	...	...	...		2	5		
Rolls	...	...	...			1		
Saffron powder	...	...	...		1			
Sandwiches, cheese & tomato	...				1			
Sausages	...	...	...			5		
Sherry	...	...	...			1		
Soft drinks	...	...	...		1	12		
Soup	...	...	...			1		
Spices	...	...	...		2	2		
Sugar	...	...	...			1		
Sugar confectionery	...	...				13		
Tea	...	...	...			1		
Trifle	...	...	...			1		
Vegetables	...	...	...		1	5		
Vegetable oil	...	...	...			2		
Vinegar	...	...	...		1	2		
					37	166	-	2

TABLE NO. 10

Food Samples reported to be not Genuine			
SAMPLE NO.	FOOD	ADULTERATION	ACTION TAKEN
187	Bread	Contained piece of thick blue paper	Manufacturer cautioned
168	'Top of the Milk'	False description	Correspondence with manufacturer

## S E C T I O N   D

### CLEAN AIR

Can industrial and domestic smoke cause lung cancer ? This question has been asked more and more in recent years and investigation rather supports the theory that this statement may well be correct. Smoke from domestic and industrial chimneys consists of gases and solid particles of soot and grit. There is a large carbon content, sulphur dioxide and the cancer-producing hydrocarbons. Figures show that the more smoke and the more benzpyrene there are, the more lung cancer there is also.

The biggest rise in the lung cancer death rate in this country has been during recent years. Bearing in mind that it may take several years to build up enough cancer-forming quantity in the body before it becomes fatal, it is interesting to note that the biggest rise in coal consumption was in the late forties and early fifties which may now be showing the results by the increase in mortality recently experienced.

The remedy for air pollution is for the local authorities to implement the Clean Air Act, 1956 in the widest possible way. Local authorities have the power to deal with industrial smoke under this Act and may make Smoke Control Areas to control the emission of smoke from houses.

#### Smoke Control Areas

During 1964 (December) the Borough of Slough No. 6 Smoke Control Order came into operation. By the end of the year there were six smoke control areas in operation covering some 6,006 premises and 1,654 acres.

The co-operation of the public generally has been good and no official objections have been made to the Minister of Housing and Local Government in respect of the making of these six Smoke Control Orders now in operation.

The Borough's No. 7 Order was confirmed in August and householders living in the area covered by this Order have been eligible for a grant towards a wider range of heating appliances than has hitherto been permissible. This has resulted from the publication of a White Paper on Fuel Supplies followed by a Circular to local authorities amending the details regarding the payment of grant. Owing to the gradual reduction of the amount of open-fire gas-coke being produced because of new methods of gas making, grants are now payable on such appliances as gas fires, electric night storage heaters, oil fires and all types of approved solid fuel fires. Grants are still payable towards the installation of the approved open fire in areas where open fire smokeless fuel is available and this applies in Slough. The public are encouraged, but not in any way compelled,

to install appliances which will burn fuel other than open fire coke so as to allow more of this fuel to be available for those householders already living in smoke control areas and those who particularly wish to install this type of fire.

The Minister of Housing and Local Government has the power to stop the payment of grant on any kind of heating appliance, the use of which is likely to cause possible shortages in any particular fuel. In December the Minister published a Circular instructing local authorities to cease paying a grant towards the installation of all electric fires other than night storage heaters using off-peak electricity. This will presumably help to spread the load at electricity generating stations.

Recently it has been found that more and more householders are changing from solid fuel to gas, electricity and oil. Now that the grant facilities have been improved this trend is likely to increase still further. It is important to note that the less solid fuel used in houses, the amount of sulphur dioxide given off into the atmosphere will be reduced. It is worth bearing this fact in mind considering that although smoke control will cost more, the ultimate result will be cleaner air.

### **Measurement of Air Pollution**

The measurement of air pollution continued during the year using several different types of apparatus some of which have been in continuous use since 1959. In October, 1961, Slough became one of a large number of towns throughout the country to take part in a National Survey of Air Pollution in conjunction with the Air Pollution Section of the Department of Scientific and Industrial Research. Five volumetric and smoke filter instruments are in daily use in this survey and are set up at different stations within the Borough. The running of these stations involves daily visits excluding weekends.

The other air pollution instruments consist of three deposit gauges and seven lead peroxide instruments which are stationed at various points throughout the Borough. These are mainly within school property and require attention once a month.

The results of these recording instruments are forwarded to the Department of Scientific and Industrial Research and are published later in their Bulletins.

### **Industrial**

The main provisions of the Clean Air Act, 1956 regarding industrial smoke relate to the emission of dark smoke in accordance with Regulations made under the Act.

Section 10 of the Act allows local authorities to reject the plans submitted in accordance with Building Byelaws unless



they are satisfied that the proposed chimney height is sufficient for the adequate disposal of smoke, grit, dust and gases so as not to be prejudicial to health or a nuisance.

A close liaison must be maintained with the Borough Engineer's Department regarding plans submitted containing new chimneys.

### **Prior Approval**

Under Section 3 of the Clean Air Act, 1956 it is necessary to give notice to the local authority where it is proposed to install a new furnace and such new furnaces must be, so far as is practicable, smokeless in operation. A firm may, if they wish, apply for Prior Approval of the new furnace before the installation is commenced. The proposal is examined by officers of this Department and if they are satisfied that the plant will operate smokelessly, prior approval is granted. The majority of firms take advantage of this scheme as it is a means of safeguarding their interests at no cost to themselves. During the year, four applications for Prior Approval were received and granted in respect of new furnaces within the Borough.

### **Administration and Statistics**

A separate section of the Department exists for dealing with all matters connected with Clean Air consisting of a public health inspector with additional qualifications who specialises in this work together with a technical assistant who is largely responsible for house to house investigation in smoke control areas.

The work of the Department in relation to Clean Air is summarised as follows:-

Visits to Domestic Premises regarding smoke control	-	2,420
Visits to industrial premises	-	137
Visits re Prior Approval	-	8
Visits to smoke control areas in operation	-	479
Interviews re smoke control	-	559
Number of smoke observations (industrial)	-	64
Number of complaints re smoke, etc.	-	32
Visits in connection with the measurement of air pollution	-	979
Miscellaneous visits	-	1,996

The Chairman of the Health and Sanitation Committee and the Chief Public Health Inspector represent the Corporation on the National Society for Clean Air and the Home Counties Clean Air Advisory Committee. The Society's Annual Conference at Harrogate was attended by the Chairman and the Public Health Inspector specialising in Smoke Control.

## SECTION E

### FACTORIES, WORKPLACES AND SHOPS

The number of factories in the Corporation register for 1964 has increased to 678, half of which are on the Slough Trading Estate. The factories cover many different trades and processes and vary widely in size. Some establishments employ several hundred persons, whilst on the other hand, there are small factories employing only a handful of persons.

All but 33 of these are factories where mechanical power is used and are the concern of the local authority only in respect of the adequacy, arrangement and maintenance of sanitary accommodation.

With regard to the non-power factories, the Council is the enforcing authority under the Factories Act, 1961, in respect of cleanliness, overcrowding, temperature, ventilation and sanitary accommodation.

Under the Factories Act, requirements in respect of means of escape in case of fire are dealt with by the County Fire Brigade.

Tables 11 and 12 give the statistical information required by the Ministry of Labour and National Service.

Where defects under the Factories Act and Sanitary Accommodation Regulations were found the persons concerned were notified in order that the necessary works could be carried out to ensure that the requirements of the Act or Regulations were fulfilled.

Inspections were also carried out under the Food and Drugs Act, 1955, and the Food Hygiene (General) Regulations, 1960, of factories where food is handled or processed. I am pleased to report that a satisfactory standard was found to exist in all these premises.

All plans deposited with the Borough Engineer for Planning and Byelaw approval are examined in order to ascertain whether there are any matters which are the concern of this Department.

Investigations are carried out with regard to public health and noise nuisances. Similar investigations are carried out following alleged offences under the Clean Air Act, 1956, but these are few and far between due to the care exercised by factory management in general to conform with the requirements of this Act.

TABLE NO 11

INSPECTION OF FACTORIES				
PREMISES	NUMBER ON REGISTER	NUMBER OF		
		INSPECTIONS	WRITTEN NOTICES	OCCUPIERS PROSECUTED
1 Factories in which Sections 1,2,3,4 and 6 are to be enforced by the Local Authority	33	12	2	-
2 Factories not included in 1 in which Section 7 is enforced by the Local Authority	637	322	4	-
3 Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	8	7	1	-
TOTAL	678	341	7	-

TABLE NO. 12

IMPROVEMENTS EFFECTED AT FACTORIES					
PARTICULARS	NUMBER OF CASES IN WHICH DEFECTS WERE FOUND				NO. OF CASES IN WHICH PROSECUTIONS WERE INSTITUTED
	FOUND	REMEDIED	REFERRED		
			TO H.M. INSPECTOR	BY H.M. INSPECTOR	
Want of cleanliness (S.1)	1	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary conveniences (S.7)	-	-	-	-	-
(a) insufficient	-	-	-	-	-
(b) unsuitable or defective	6	5	-	-	-
(c) not separate for sexes	-	-	-	-	-
Other offences against Act (not including offences relating to Outworkers)	-	-	-	-	-
TOTAL	7	5	-	-	-

## **Outworkers**

Those firms who employ persons to carry out work outside their factory premises are required by the Factories Act, 1961, to furnish the Local Authority, during February and August, with lists giving the names and addresses of all such persons.

The premises where this work is carried out, invariably dwelling-houses, are then subjected to inspection for the purpose of ensuring that working conditions are satisfactory.

The returns for 1964 showed that there were only 28 premises within the Borough where 'homework' was carried out. All were found to be satisfactory.

## **Drinking Water**

One certificate of approval of drinking water supply was granted in pursuance of Section 57 of the Factories Act, 1961, in respect of a factory with a deep well supply.

## **Workplaces**

Certain premises which are neither factories nor shops are included under the heading of workplaces. In the main they are one-man workshops and they are inspected to ensure that satisfactory standards of sanitary accommodation, ventilation, cleanliness and overcrowding required by Sections 46 and 92 of the Public Health Act, 1936, are observed. Eleven visits were made during the year.

## **Places of Entertainment**

Several visits of inspection were made during the year to places of entertainment and conditions were found to be satisfactory.

## **Shops Act, 1950 and Young Persons Employment Act, 1938**

In connection with the various aspects of the above Acts, the following inspections were carried out during 1964:-

Arrangements for the health and comfort of shop-workers	...	...	...	...	...	249
Conditions of Employment	...	...	...	...	...	221
Hours of employment of young persons	...	...	...	...	...	35
Hours of Closing	...	...	...	...	...	207
Sunday Trading	...	...	...	...	...	31



## Offices, Shops and Railway Premises Act, 1963

This Act of which the main provisions came into force in August 1964, is described as making fresh provisions for securing the health, safety and welfare of persons employed to work in office shop and certain railway premises. Thus its provisions relating to offices and certain railway premises are the first of their kind, and extend health and welfare legislation into new fields of non-industrial employment.

All office workers will be within the scope of the Act whether they work in separate office buildings or in offices forming part of other buildings, such as in schools, factories, hospitals, clubs, hotels. The definition of office purposes covers a wide variety of activities to protect all who are office workers in the ordinary sense.

Shops are defined equally comprehensively. They include wholesale and retail premises, restaurants, public houses and premises where retail trade or business is carried on, such as hairdressers, television rentals and even a gift shop in which goods are supplied against coupons.

'Railway Premises' means a building (or part of one) occupied by railway undertakers for the purposes of the railway undertaking carried on by them and situate in the immediate vicinity of the permanent way. These premises will be the responsibility of H.M. Inspector of Factories for inspection purposes, but the following will be inspected by the Local Authority:- offices in hotels, other non-railway offices, and all shops (including buffets, bars and restaurants of hotels, bookstalls whether railway or non-railway.)

The general provisions of the Act are comprehensive and relate to the following matters:-

- |                               |   |
|-------------------------------|---|
| 1. Cleanliness                | 10. Sitting Facilities                    |
| 2. Overcrowding               | 11. Seats for Sedentary Workers           |
| 3. Temperature                | 12. Eating Facilities                     |
| 4. Ventilation                | 13. Floors, passages and stairs           |
| 5. Lighting                   | 14. The safety and operation of machinery |
| 6. Sanitary Conveniences      | 15. First Aid Facilities and Personnel    |
| 7. Washing Facilities         | 16. Noise and Vibration                   |
| 8. Drinking Water             | 17. Fire Precautions                      |
| 9. Accommodation for Clothing |   |

The Act prescribes standards under several of the above headings, and the Minister is empowered by regulations to prescribe standards under many headings.

It is the Government's intention that this Act be actively enforced, and each Local Authority is required to submit annually to the Minister of Labour a report of their proceedings under the Act and such reports must be kept available for inspection by the public.

The Borough Council has decided that this Act shall be administered by the Chief Public Health Inspector and a special officer has been appointed for this work. During 1964, work under this Act has been confined to administration, including the registration of premises.

The following tables have been compiled from information received from employers concerning premises to be registered under the Act. They are presumed not to present a complete picture of the situation in the Borough but will be amended as the work of general inspection proceeds.

TABLE NO. 13

CLASS OF PREMISES	NUMBER
Offices	268
Retail Shops	496
Wholesaleshops, Warehouses	22
Catering Establishments (open to public)	69
Fuel Storage Depots	1
CLASS OF WORKPLACE	NO. OF PERSONS EMPLOYED
Offices	3,182
Retail Shops	3,637
Wholesale Departments, Warehouses	521
Catering Establishments (open to public)	611
Canteens	55
Fuel Storage Depots	7
TOTAL	8,013
TOTAL MALES	3,142
TOTAL FEMALES	4,871

## S E C T I O N   F

### PEST INFESTATION AND DISINFESTATION

The Pest Control section of the Department is of vital importance and its efforts can be regarded as a valuable contribution to public health. It is believed to be well equipped for discharging the requirements of the Prevention of Damage by Pests Act, 1949, which places the duty on the Slough Borough Council to carry out Pest Control work.

Since Pest Control is a basic necessity in environmental health it cannot be over-stressed that occupiers of premises should practise the basic principles of hygiene e.g. proper disposal of waste food and the removal of refuse which attracts rodents and insects.

The pest control officer is responsible for supervising the whole of this work in which 5 manual workers are engaged, and since pest infestation is so closely associated with food and physical defects in property it follows that there must be a very close liaison between the pest control officer and the district public health inspectors.

The rodent control service is provided free to domestic premises but a charge is made for work done on all business premises, some of which are serviced by annual agreement.

Pests other than rats and mice are dealt with as occasion arises on a chargeable basis.

The Government is continually being advised by a Committee which has been set up to investigate the use of poisonous substances, to determine the toxicological significance of the use of pesticides in relation to animal and plant tissues and generally to study the behaviour of pests. It has been said that while there is no great cause for alarm regarding the use of pesticides there is no room for complacency.

This year marks the tercentenary of the Great Plague of London, 1665. After all these years we still have to consider the possibility of outbreaks of diseases which could be caused by rats. It is most important that the presence of rats should be reported to this department so that immediate action can be taken to eliminate them. It is equally important that mice infestations should also be reported.

Methods of rodent control have improved over the years to such an extent that the Ministry of Agriculture, Fisheries and Food have stated that since 'Warfarin' made its appearance as a rodenticide the ease and safety of killing rats has been so marked that rodent disinfestations are decreasing.



This Borough has a large Trading Estate which is expanding each year. Merchandise arrives here from many parts of the world and from all parts of this country. The possibility of rodents travelling with the goods arriving in this Borough is not overlooked. Most business houses on the Estate are as anxious as the local authority to exterminate the rodents.

The number of rats infesting the sewers in this Borough have shown a marked decrease. Treatment of sewers and surface infestations are carried out in accordance with instructions from the Ministry of Agriculture, Fisheries and Food.

It is pleasing to record that the interest and co-operation of the general public has increased. Citizens are quick to inform the Department of signs of infestation by rodents.

During 1964 the District Public Health Inspectors and the Pest Control Officer investigated 936 infestations which were subsequently treated.

The Pest Control Officer made 1,886 visits to premises in connection with surveys, giving advice to owners and occupiers about rat-and-mouse-proofing of business premises and private houses and supervising the work of the rodent operators.

There were 657 notifications of rat infestation and 179 notifications of mouse infestation.

Table No. 14 gives a summary of the rodent operators' work during 1964

#### **Annual Agreement Scheme**

The Rodent Control annual agreement scheme for business premises which the Council has operated since 1949 has again worked smoothly during the year. These premises are surveyed at regular intervals and all infestations are treated immediately.

Considerable effort has been made over the years to encourage industrial and commercial concerns to participate in the scheme and it is believed that this prompt and efficient service is much appreciated.

During 1964, 111 premises were serviced under the Council's scheme and the total income from these agreements amounted to £1,475. The scheme has continued to operate on a self-supporting basis and charges are made according to the size and type of premises.

#### **Workable Area Committee**

The South Bucks and East Berks Workable Area Committee, convened by the Ministry of Agriculture, Fisheries and Food, is



supported by most Local Authorities in the area. Officers and members meet twice a year, thus providing a common ground for discussion and exchange of information on topics which continually arise in this sphere.

By films and demonstrations of equipment one learns of the behaviour of pests and also of new methods of treatment.

Scientific research personnel of the Ministry's Infestation Division give lectures on the various aspects of their work.

These meetings are indeed very worthwhile and in recent years the Committee has widened its scope to include, in addition to rodent control, all matters relating to land pests and insect control. The Chairman of the Health and Sanitation Committee and the Chief Public Health Inspector represent the Borough Council.

#### **Other Pests**

A few complaints of pests other than rodents were received and treatments were carried out as follows:-

<i>Wasps</i>	<i>Flies</i>	<i>Beetles</i>	<i>Other Pests</i>
28	7	6	71

#### **Disinfestation and Disinfection**

Bedding and other articles were disinfected and disinfested.

A number of premises and articles were also disinfected by sealing the rooms and by using a formaldehyde fumigant.

The following work was supervised by the Pest Control Officer during the year:-

Premises Disinfected	-	5
Premises Disinfested	-	42

In addition, bedding and articles of clothing from some premises associated with infestation by vermin were destroyed under the supervision of the Pest Control Officer.

TABLE NO. 14

Rodent Infestation Control (Rodent Operators)							
	PRIVATE DWELLINGS	BUSINESS PREMISES		REFUSE DESTRUCTOR TIPS DUMPS ETC.	PARKS HEDGES DITCHES ETC.	OTHER COUNCIL PROPERTIES	TOTAL
		ANNUAL AGREEMENT SCHEME	SHORT TERM ACTION				
1. Investigations made ...	2,424	1,227	188	25	256	173	4,293
2. Treatments carried out by the Corporation ...	1,789	718	178	22	75	36	2,818
3. Poison baits laid ...	6,111	2,850	825	206	1,147	954	12,093
4. Poison baits taken ...	3,183	692	352	99	540	576	5,442
5. No. of visits made ...	5,604	2,033	321	47	391	269	8,665

## SECTION G

### MISCELLANEOUS

#### Water Supply

In 1964 some 37 visits were made in connection with water supplies and swimming bath waters and the following samples were procured:-

##### *Domestic Water Supplies*

Wells	...	...	...	...	...	2
-------	-----	-----	-----	-----	-----	---

##### *Swimming Bath Waters*

Slough Community Centre	...	...	34
Council Schools	...	...	14
Private Schools	...	...	6

The results of all these samples proved to be satisfactory.

#### Noise

Since the publication of the Report of the Wilson Committee in 1963 no further legislation has reached the Statute Book. This Committee was concerned with the investigation of the nature, sources and effects of noise and was required to advise on what further measures could be taken to mitigate it. A great deal of research has been carried out and is still being carried out on the subject of noise, particularly in the field of aircraft noises related to jet aircraft and supersonic aircraft of the future. At the present time this would appear to be insoluble. Noise produced by aircraft is exempted from the provisions of the Noise Abatement Act, 1960.

Second to aircraft I would suggest that the greatest source of noise today is that caused by ever increasing road traffic. We would appear to have become immune to the general noise occasioned by traffic but as a matter of fact the level of noise is high. This level is increased by heavy lorries and motor cycles by which we are shaken out of our usual indifference to traffic noise as a whole. It is agreed that a lot of the annoyance from noise can be reduced by a little thought and expense.

During 1964, following complaints of noise nuisances, some 38 visits were made, but none was found to constitute a statutory nuisance within the meaning of the Noise Abatement Act, 1960.

#### Hairdressers

At the end of the year there were 69 premises registered for the carrying on of the business of hairdresser and/or barber under Section 82 of the Buckinghamshire County Council Act, 1957.

All these premises were subjected to routine inspection by the District Public Health Inspectors during the year. Particular attention was paid to the cleanliness of premises, instruments towels, materials and equipment, and to the cleanliness of persons employed on the premises.

### **Offensive Trades**

Two rag and bone dealers and a fat melter are now the only offensive trades scheduled under the Public Health Act, 1936, which operate within the Borough.

In 1964 the Council granted the necessary consent in each case

### **House Drainage**

One hundred and one complaints were received during 1964 concerning choked or defective drainage and sanitary fittings. The District Inspectors made some 205 visits for the purpose of investigation, testing and supervision of remedial works. At 2 premises drainage systems were re-constructed and other sanitary improvements were effected at 55 premises. Further progress was made with the abolition of cesspools during the year.

### **Storage of Petroleum**

As required by the Petroleum (Regulation) Acts, 1928 and 1936, the storage of petroleum spirit and mixtures is subject to license by the local authority which may attach such conditions as it thinks fit. These conditions have become standardised and with certain slight variations to suit local circumstances follow codes of practice which are advised by the Home Office. Petroleum and its associated products are only part of the total amount of inflammable materials which are widely stored and used in industry. The rest are not petroleum products and are not subject to any control by the local authority.

In a town of the size and character of Slough, constant supervision and inspection by the technical officers are necessary to ensure that the conditions attached to licences are being observed and because of the potential fire risks vigorous enforcement of the requirements of the Acts is sufficient.

Close liaison exists between this Department and officers of the Buckinghamshire Fire Service on problems which arise from time to time. The Southern Electricity Board examine periodically, on behalf of the Council, every installation to see that all electrical equipment associated with petrol pumps is in good condition, as well as new installations during the course of the year.



Within the Borough at the end of 1964, 175 premises were licensed for the storage of 797,149 gallons of petroleum spirit and petroleum mixtures and 2 premises for the storage of 1,596 lbs. of carbide of calcium.

During 1964, 597 visits of inspection were made in connection with the storage of petroleum.

### **Hackney Carriages**

The legislation under which the Borough Council exercises its control of hackney carriages is the Town Police Clauses Act, 1847 together with byelaws made thereunder.

In 1964 the Council again decided that 35 hackney carriages were adequate in meeting the needs of the district. In 1962 the number was increased from 30 to 35. With effect from 1st December, 1964, 35 licences were issued for the period ending 30th November, 1965.

Before a licence is granted each vehicle is subjected to a detailed examination and certified as being roadworthy by the Consulting Engineers who are appointed and paid by the Corporation. This ensures that licences are granted only in respect of vehicles which are mechanically fit and safe for public service.

As a measure of control designed to safeguard the public, each driver must satisfy the Council as to his medical fitness to drive a hackney carriage. This examination becomes more frequent after a driver reaches the age of 50 years. Licences were granted in respect of 47 hackney carriage drivers.

The age of vehicles licensed in 1964 was as follows:—

<i>Year of Registration</i>	<i>Number of Vehicles</i>
1960	1
1961	2
1962	4
1963	12
1964	16
Total 35	

During the year 10 vehicles changed ownership; one proprietor owns 2 licensed vehicles and 33 proprietors each own one licensed vehicle.

Three hundred and twenty two visits were made during 1964 in connection with hackney carriage licensing. These visits were in respect of the examination of vehicles on the rank, and at the Corporation's Highways Depot; cleanliness, resealing of meters, and checking on the observance of byelaws generally.

No complaints were received from members of the public during the year.

### **Heating Appliances (Fireguards) Regulations, 1953**

These Regulations are one aspect of consumer protection administered by the Department and designed to ensure that heating appliances are properly guarded, several tests being prescribed to establish this fact. New heaters have not been found lacking, but over the years several second-hand dealers have been discovered offering for sale old fashioned electric or gas fires without proper guards. This legislation was aimed at stopping the supply of unguarded heating appliances and has been quite effective but unfortunately it is known that there are still large numbers of heaters inadequately guarded of very ancient vintage which cause many avoidable accidents.

### **Licensing of Game Dealers**

Nine licences were granted by the Corporation authorising dealers to buy and sell game.

### **Registries for Female Domestic Servants**

Although there are still five Female Domestic Servants' agencies registered in the Borough, registration is a token only and the amount of business carried out in domestic servants registration is apparently negligible, apart from a certain increase in the number of au pair girls who come into domestic service from Continental countries.

### **Registration of Dealers in Old Metal**

Five premises remained on the register as in previous years, this registration being mainly for the purpose of facilitating inspections by the police.

# COMMITTEE FOR EDUCATION 1964

## *Chairman*

COUNCILLOR MRS E.E. SCOTT-PICTON

## *Vice-Chairman*

ALDERMAN P. LIGHTFOOT

ALDERMAN N.M. ESCHLE

ALDERMAN MRS. M.J. MORGAN

ALDERMAN A.W.J. PUSEY

COUNCILLOR R.A. CAIL

COUNCILLOR R.F. EVERETT

COUNCILLOR A. HACKER

COUNCILLOR E.J. JAMES

COUNCILLOR C.D. MERRILLS

COUNCILLOR C.A. PENN

COUNCILLOR I.S.M. REA

COUNCILLOR J. RIGBY

COUNCILLOR P.T. SMART

COUNCILLOR W.G. TONG

COUNCILLOR L.S. WILLIS

## *Co-opted Members*

MR. G. BATE

FATHER N. BURDITT

MR. A.S. HUMPHREYES

MR. F.W. SPOLTON

COUNCILLOR K. WRIGHT

## *Borough Education Officer*

C.S. SMYTH, B.A.

## *Staff Engaged in Medical Inspections during 1964*

Divisional School Medical  
Officer:

MACDONALD A. CHARRETT, M.R.C.S.,  
L.R.C.P., D.P.H., F.R.S.H.

Assistant School Medical  
Officers:

JOAN GRAY, M.B., Ch.B., D.P.H.

ROY A. MATTHEWS, M.B., B.S.,  
M.R.C.S., L.R.C.P., D.P.H.  
(Resigned 21.4.64)

ANNE M. DIXON, M.B., B.S., D.P.H.

AUDREY MYANT, M.B.B.S., M.R.C.P.,  
D.P.H. (Appointed 1.7.64)

BARBARA V. LONGLEY, M.B.B.S.,  
M.R.C.S., L.R.C.P.  
(Appointed 28.9.64)

## *Ophthalmic Surgeon*

C.B.V. TAIT, M.B., B.S., M.R.C.S., L.R.C.P., D.O.M.S., R.C.P.S.

(Part-time services made available by arrangement with the  
North West Metropolitan Regional Hospital Board)

*Child Guidance Clinic and Crisis Consultation Service*

*Psychiatrist*

MILDRED I. POTT M.B., Ch.B. M.R.C.S., L.R.C.P., D.C.H., D.P.M.  
(Part-time service made available by arrangement with the  
North West Metropolitan Regional Hospital Board)

*Educational Psychologists*

MISS J.M. FREEMAN, B.A.  
MRS. E. THORN, B.A. (Appointed 1.6.64)

*Psychotherapist*

MRS. I. WELLIN

*Psychiatric Social Worker* - 1 (part-time)  
*Social Workers* - 2 (part-time)

*School Dental Surgeons*

Orthodontist: MISS A.M. BLANDFORD, L.D.S., D.Orth.  
Dental Officers: MR. C. HOWARD, B.D.S., L.D.S.  
MRS. M.E.J. BARKER, L.D.S.  
DR. E. DEUTSCH, M.M. (Vienna)(part-time)  
MRS. B.A. MAUDSLEY, B.D.S., L.D.S.  
(part-time)  
MRS. D. LEVY, L.D.S. (part-time)

*Speech Therapists*

MISS P. SINGER (Resigned 31.12.64)  
MRS. R.B. SWALLOW  
MISS P. BELCHAM (Appointed 1.9.64)

*Remedial Gymnast*

MISS J. GARSCADDEN

*Nursing Staff*

MISS M.F. WELLER, Area Superintendent Health Visitor

*Health Visitors* - 6

*School Health Assistants* - 4



# A N N U A L   R E P O R T

## O F

### T H E   S C H O O L   H E A L T H   S E R V I C E ,   1 9 6 4

This is the second report of the work of the school health service since the Borough Council began to act as an Excepted District under the Education Act, 1944, in May 1962.

#### *Number of Children on School Roll - 1963/64*

	<i>January 1963</i>	<i>January 1964</i>
Nursery Schools ... ..	450	480
Primary Schools - Infant and Junior	7,717	7,829
Secondary Schools - Modern ... ..	4,320	4,423
- Technical ... ..	788	763
- Grammar and High	1,723	1,745
Special Day School .. ...	135	153
	15,133	15,393

#### MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS - 1964

T A B L E   N O.   1

PERIODIC MEDICAL INSPECTIONS					
<i>Age Groups Inspected (by years of birth)</i>  (1)	<i>Number of Pupils Inspected</i>  (2)	<i>Nutritional Condition of Pupils Inspected</i>			
		<i>Satisfactory</i>		<i>Unsatisfactory</i>	
		<i>No.</i> (3)	<i>% of Col.2</i> (4)	<i>No.</i> (5)	<i>% of Col.2</i> (6)
1960 & later	482	480	99.8	2	0.3
1959	1,399	1,398	99.9	1	0.1
1958	576	576	100	-	-
1957	313	313	100	-	-
1956	241	240	99.9	1	0.1
1955	164	164	100	-	-
1954	212	212	100	-	-
1953	1,053	1,053	100	-	-
1952	415	415	100	-	-
1951	167	167	100	-	-
1950	473	473	100	-	-
1949 & earlier	1,810	1,810	100	-	-
TOTAL	7,305	7,301	99.95	4	0.05

The grand total compares with:-

6,463 in 1963  
 5,159 in 1962  
 7,019 in 1961  
 4,046 in 1960  
 4,489 in 1959

T A B L E N O. 2

PUPILS REQUIRING TREATMENT AT PERIODIC MEDICAL INSPECTIONS (excluding Dental Diseases and Infestation with Vermin)			
<i>Age Groups Inspected (by Year of Birth) (1)</i>	<i>Treatment Required</i>		<i>Total Individual Pupils (4)</i>
	<i>For Defective Vision (excluding Squint) (2)</i>	<i>For any other condition as recorded in Table No. 3 (3)</i>	
1960 & later	2	49	51
1959	23	182	195
1958	11	136	144
1957	14	89	101
1956	15	71	81
1955	8	39	46
1954	25	24	47
1953	125	100	219
1952	36	70	106
1951	6	22	28
1950	29	36	59
1949 & earlier	233	175	405
<b>TOTALS</b>	<b>527</b>	<b>993</b>	<b>1,520</b>

#### INFESTATION WITH VERMIN

**Notes:** All cases of infestation, however slight are included in this table.

The numbers recorded at (b) relate to individual pupils, and not to instances of infestation.

- (a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons ... .. 22,829
- (b) Total number of individual pupils found to be infested ... .. 121

Of the 121 children found to be infested 48 have been noted for the first time.

Infestations are treated and cleared by parental co-operation in conjunction with home visits by Health Visitors, and notices only issued where absolutely necessary - two cleansing notices were issued in accordance with Section 54 (2) of the Education Act, 1944

T A B L E N O. 3

**DEFECTS FOUND BY MEDICAL INSPECTIONS  
PERIODIC INSPECTIONS**

This table includes individual pupils requiring treatment (T) or observation (O) even though many are already under treatment or observation as a result of previous medical examinations.

DEFECT CODE NO. (1)	DEFECT OR DISEASE (2)	P E R I O D I C I N S P E C T I O N S							
		ENTRANTS		LEAVERS		OTHERS		TOTAL	
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4.	Skin	6	13	30	10	49	46	85	69
5.	Eyes								
	(a) Vision	25	26	219	27	283	142	527	193
	(b) Squint	11	7	1	-	30	19	42	26
	(c) Other	1	1	4	-	6	5	11	6
6.	Ears -								
	(a) Hearing	29	17	14	10	106	75	149	102
	(b) Otitis Media	3	2	1	-	4	4	8	6
	(c) Other	1	-	2	-	3	1	6	1
7.	Nose and Throat	27	86	22	5	86	107	135	198
8.	Speech	17	28	2	5	52	45	71	78
9.	Lymphatic Glands	1	9	-	-	3	11	4	20
10.	Heart	6	31	8	7	23	53	37	91
11.	Lungs	12	20	3	13	44	59	59	92
12.	Developmental -								
	(a) Hernia	1	7	7	-	1	3	9	10
	(b) Other	4	29	2	1	17	79	23	109
13.	Orthopaedic -								
	(a) Posture	10	8	31	3	63	59	104	70
	(b) Feet	49	25	13	9	79	94	141	128
	(c) Other	7	13	8	8	42	34	57	55
14.	Nervous System -								
	(a) Epilepsy	4	1	3	-	6	9	13	10
	(b) Other	-	7	1	1	13	31	14	39
15.	Psychological -								
	(a) Development	4	14	-	-	20	71	24	85
	(b) Stability	4	23	3	-	10	31	17	54
16.	Abdomen	-	1	5	4	5	9	10	14
17.	Other -								
	Diabetes	-	-	1	-	4	5	5	5
	Obesity	-	-	-	-	2	9	2	9
	Nephritis	1	-	-	-	-	-	1	-
	Meningitis	-	-	-	-	1	-	1	-
	General	-	4	-	-	2	15	2	19
	Kidney	-	-	1	-	-	-	1	-
	Menstruation	-	-	-	3	-	3	-	6
	Overweight	-	1	-	-	-	11	-	12

T A B L E N O. 4

SPECIAL INSPECTIONS			
Defect Code No. (1)	Defect or Disease (2)	SPECIAL INSPECTIONS	
		<i>Pupils requiring Treatment</i> (3)	<i>Pupils requiring Observation</i> (4)
4.	Skin ... ..	1	2
5.	Eyes -		
	(a) Vision ...	11	5
	(b) Squint ...	2	-
	(c) Other ..	-	-
6.	Ears -		
	(a) Hearing ...	13	9
	(b) Otitis Media	-	-
	(c) Other ...	-	-
7.	Nose and Throat	3	5
8.	Speech ...	15	1
9.	Lymphatic Glands	-	-
10.	Heart ... ..	2	1
11.	Lungs ... ..	4	-
12.	Developmental -		
	(a) Hernia ...	-	-
	(b) Other ...	-	2
13.	Orthopaedic -		
	(a) Posture ...	5	4
	(b) Feet ...	3	1
	(c) Other ...	4	2
14.	Nervous System -		
	(a) Epilepsy	1	-
	(b) Other ...	3	1
15.	Psychological -		
	(a) Development	6	3
	(b) Stability	3	3
16.	Abdomen ...	-	-
17.	Other -		
	(a) Diabetes	1	-
	(b) Nephritis	1	-

## POSTURAL DEFECTS

Pupils treated at Hospitals or schools for postural defects - 478



## REPORT OF THE REMEDIAL GYMNAST

In assessing the work for the year, the figures given below show that the numbers of children requiring treatment are again high, and consequently many are being accommodated in over large and unsuitable groups. The weekly roll consists of at least 260 children and at the present time, another 16 sessions are needed to re-group these correctly and eliminate the waiting lists. In addition to this, several new schools have opened in the district during the last few years which has made timetable planning even more difficult.

Head Teachers and staff have continued to give their help and support and 122 parents accepted invitations to attend one of the sessions in a school.

In addition, staff at Slough High School and Slough Technical School are continuing treatment to approximately 15 more children.

Of the cases referred this year there is a decline in chest conditions and a marked increase in foot defects.

	1963	1964
No. of schools visited	35	35
No. of children treated	427	445
New cases referred	190	212
Children who have left school or district and those discharged from treatment	190	184
<b>Summary of Cases referred</b>		
Those for postural defects	134	125
Those for foot defects	184	234
Those for knee defects	13	11
Those for asthma and chest conditions	81	69
Those with neurological symptoms	15	6

## SPEECH THERAPY

### Statistics

No. on waiting list 31.12.64	7
Cases being treated at 1.1.64	89
Cases being treated at 31.12.64	140
Number discharged during 1963	55
Number discharged during 1964	108
Number treated during 1963	144
Number treated during 1964	248

The number of cases treated shows a big increase upon 1963 and this is largely due to the fact that we had almost our full complement of Speech Therapists throughout the year.

We were extremely fortunate in having a highly qualified and very experienced American Speech Therapist, Miss Phyllis Singer with us during the whole of 1964. We found her services of great value in many different ways, but perhaps most of all in the Cerebral Palsy Unit in which she spent a great deal of her time.

EYE CLINIC

Eye clinics which are held at Burlington Road Health Centre and shared with the Eton Division, continued during 1964 to deal with pupils found, at routine or other medical inspections, to have defective vision or other eye defects.

Arrangements for attendance at these clinics are made by school health service staff. the North-West Metropolitan Regional Hospital Board supplies the ophthalmic surgeon and optician service.

The number of pupils referred during the year was as follows:-

For errors of refraction, including squint	...	728
For other defects	... ..	13
Spectacles were prescribed for	... ..	245 pupils

PARTIALLY HEARING UNIT

When the Partially Hearing Unit was re-opened in January 1964 a brief survey revealed that there were no known cases of children of infant school age with defective hearing. It was therefore agreed to adapt furniture and equipment to accommodate a group of children of junior school age.

After careful consideration the half-time system was adopted for three reasons:-

- (1) It would be incorrect for children of junior school age to be occupied full time in an infant environment.
- (2) By attending in the morning for specialist tuition in Language, Auditory Training, Speech Development, and Number and then returning to their respective classes in the afternoon for Social Studies, the children have the opportunity to compete with hearing children. This also provides as near complete integration as possible.

- (3) The teacher of the deaf is free to visit other schools to assist Heads and teachers to overcome problems concerning children with defective hearing in their schools, and to provide auditory and speech training where necessary.

This system has proved very successful, and I am happy to learn from the Headmaster of the Lea Junior School that there is a marked improvement generally in the work of the partially hearing children; they are also more confident and socially adjusted.

Children in schools in both Slough and Eton Divisions are attended at the request of Medical Officers or Head Teachers.

Looking to the future, in 1966-67 the Junior Group will be requiring the facilities of a Senior Unit. Already there are 7 children of senior age who would benefit by special education. In the same period there will be 8 Junior and 5 Infant age children who will require special education. It appears, therefore, that more Units and additional teachers of the deaf will be required.

In concluding this Report I would like to point out that many of our successes would not have been possible but for the excellent co-operation of Local Consultant E.N.T. Surgeons, the Hearing Aid Department of King Edward VII Hospital, Windsor and the Heads of schools, particularly Miss Hague, and Mr. Griffiths of the Lea Infants and Junior Schools respectively.

#### CEREBRAL PALSY UNIT, SLOUGH

The demands upon this Unit continued to grow during 1964 and at the end of the year, 19 children were attending on a part-time or full-time basis, compared with 15 at the end of 1963.

14 of these children were over the age of five years and twelve of them were receiving full-time special educational training according to their individual requirements while the other two and the five remaining children under the age of five years attended the nursery section for whole or part-time training.

Owing to increased numbers the Centre's activities were divided into three.

There is now a special care section which looks after the new intakes and the severely physically and mentally handicapped children; a pre-school section which caters for children over five years of age but who are so immature that they are not ready for formal education; and a school room in which the remainder receive educational instruction under the guidance of the Headmaster, the assistant teacher and one nursery assistant.



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In addition to these children, all of whom receive physiotherapy, another 8 children attended from time to time with their parents for treatment and guidance. It was unfortunate that the physiotherapist was only part-time during most of the year under review but we have been fortunate in obtaining a full-time male physiotherapist who started in December 1964.

It would not be right to let the year go by without paying tribute to the very good work undertaken by Miss Singer, the American Speech Therapist who spent a year in this area. Her great experience was extremely helpful and she had left behind a legacy of a high standard of treatment which her successors will have to fight hard to live up to.

With the regular visits paid by the Consultant Paediatrician and with the good liaison which has been effected with the Audiology Unit at Reading, together with the experience of our own staff over the past three years we now feel that we have a Unit which can compare with the best. Problems will, however, once again begin to make themselves very obvious in the next two or three years when we must seriously be deciding what facilities will be available for the children during their late childhood and adolescence.

Meanwhile, I would like to record my appreciation of the way in which all the staff have devoted themselves to the children and to express grateful thanks to the Head Teachers of James Elliman County Primary School and Baylis Court Nursery School for offering part-time schooling to the children attending the Centre.

#### HEALTH EDUCATION

Health teaching has continued in those schools where the Head Teacher has requested or agreed to it. The main subject for senior children has been smoking in relation to health, and talks and film shows have been given to school leavers and 12-year-olds on this subject, resulting in many lively discussions.

Oral Resuscitation was demonstrated after school hours to 6 groups of Junior School staff.

The dental health education programme continued with the primary schools having tuition from the Dental Auxiliary, and the Health Education Staff visiting the Secondary schools in the Borough.



## DENTAL SERVICE

### Treatment for Schoolchildren

No. of children inspected	11,420
No. of schools inspected	31
No. of children requiring treatment	5,471
No. actually treated	1,472
No. of attendances (excluding orthodontics)	4,274
Fillings - - Permanent teeth	2,616
- - Temporary teeth	1,377
Extractions - Permanent teeth	141
- Temporary teeth	350

### Treatment for Pre-schoolchildren and Expectant and Nursing Mothers

Pre-schoolchildren treated	93
Fillings for pre-schoolchildren	160
Attendances for pre-schoolchildren	146
Expectant and nursing mothers treated	67
Fillings for mothers	108
Attendances for mothers	137

Most of the schools in the Slough area were visited by Dental Officers for a dental inspection of the pupils, and a number of schoolchildren, pre-schoolchildren and expectant mothers received dental treatment at the Slough Clinic during the year.

The trend towards the conservation of teeth has been maintained; more permanent teeth being filled and it was necessary to extract fewer permanent teeth this year. The impact of dental health education in the schools, which has been carried out by the staff of the Health Education Department and by the Dental Auxiliary, is beginning to be felt, and is reflected in the greater interest shown in the cleaning of teeth and maintaining good dental hygiene. A large number of children are receiving regular dental attention from practitioners in the General Dental Service.

The sample survey of the teeth of children who have had the benefit of living in the area of Slough with almost the ideal amount of fluoride in the drinking water, has continued to show about half the amount of dental decay, compared with those in other areas.

The new dental clinics in Langley and Britwell have treated children throughout the year and the facilities provided have proved very satisfactory. The plans of these clinics have been used as a basis for designing new dental clinics in the County

and visitors have been impressed with the accommodation and equipment provided.

**Orthodontic Treatment**

Number of children in treatment	140
New patients	55
Patients carried forward from previous year	85
Attendances for orthodontic treatment	363
Orthodontic plates fitted	47

Orthodontic treatment (i.e. the correction of abnormalities of the jaws and teeth) has been carried out by the County Orthodontist who has visited Slough weekly during the year. The demand for this specialist treatment continues to be high, and the improvement in both appearance and function of the teeth, as a result of treatment, has been greatly appreciated by both parents and children.

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